

BAY PINES VAHCS NEUROPSYCHOLOGY POSTDOCTORAL RESIDENCY PROGRAM TRAINING BROCHURE (2023-25)



Mental Health and Behavioral Sciences Service (MH&BSS)
Bay Pines VA Healthcare System

BAY PINES VA HEALTHCARE SYSTEM NEUROPSYCHOLOGY POSTDOCTORAL RESIDENCY TRAINING PROGRAM

Bay Pines VA Health Care System
10,000 Bay Pines Blvd
Bay Pines FL, 33744
(727) 398-6661

APPLICATION DEADLINE: JANUARY, 2, 2023

Welcome prospective Residents!

Thank you for taking the time to learn about our Neuropsychology Postdoctoral Residency Training Program by reading through our brochure. We hope that you consider our site for training, as Bay Pines offers not only incredible quality of life (Psychology on the Beach!) but a rich, rewarding and supportive training culture that values work-life balance, fairness and equality and a respect for individual differences and diversity in its staff and trainees. Please feel free to reach out to us at any time with questions about our program and larger community!

Highlights of our Training Program and Community

- **Location!** The Bay Pines VA Medical Center is waterfront, located next to the Gulf of Mexico and Boca Ciega Bay and offers 360 days of sunshine and warm (54-90 degrees) weather year-round. During lunch you can walk out to our pier and watch for dolphin and manatees.
- **Balance!** Our staff models true work-life balance and promotes wellness and self-care in every aspect of the training program. While Residents work hard, they can expect to have plenty of time to enjoy the ocean, parks and community events. Within the facility itself, Residents have access to gyms, yoga and tai chi classes, as well as a running path surrounding the campus.
- **Respect and Support!** Psychology Service is well-respected across the medical center. We are also highly integrated into most aspects of patient care which provides ample opportunities for collaboration with other disciplines. We also have Psychologists in key leadership positions which provides exposure for trainees to learn about the administrative roles Psychologists can hold. Residents are held in high regard for their role within various treatment teams.
- **Post Program Placement!** All of our Postdoctoral graduates have been successful in securing prestigious job placements prior to completing the program. In general, Bay Pines has excellent Psychology Service career retention of previous trainees – which speaks to our service culture and staff. Currently, 8 of our 25 Training Committee staff members were previous trainees here at Bay Pines!
- **Culture and Diversity!** Bay Pines VA offers monthly on-campus multicultural events and fairs available for staff and trainees to attend during work hours. Our Training Programs take their commitment to promoting multicultural competence very seriously. The Multicultural Diversity Sub Committee meets monthly with a mission to support the development of multicultural competencies, appreciation of diversity in all its forms, and the promotion of social justice. The members help cultivate an environment of safety, that supports open and respectful dialogue, exchange of ideas, and self-reflection. Psychology

staff and trainees at all levels are encouraged to join and participate. In addition, the larger Tampa Bay area offers a diverse and rich cultural makeup. Community festivals, parades, sporting events, fund raisers, advocacy events, faith-based events, music, film, and art shows are offered throughout the year. Many occur outdoors on our beautiful beaches or in our multitude of public parks.

ACCREDITATION STATUS

The Neuropsychology Postdoctoral Residency Training Program at the Bay Pines VA Healthcare System is an APA accredited program. Bay Pines has trained Neuropsychology Postdoctoral Residents since 2015 and was granted APA accreditation status for specialty training in Neuropsychology in 2020.

For general information, individuals may contact:

American Psychological Association
750 First Street, NE
Washington, DC 20002-4242
(800) 374-2721

For information related to the programs accredited status, please contact the CoA at:

Office of Program Consultation and Accreditation
American Psychological Association
750 First Street, NE
Washington, DC 20002
Phone: (202) 336-5979
E-mail: apaaccred@apa.org
Web: www.apa.org/ed/accreditation*

PSYCHOLOGY SETTING AND PHILOSOPHY

The structure of the Bay Pines VA Healthcare System 2-Year Neuropsychology Postdoctoral Residency Program offers advanced specialty training in Clinical Neuropsychology within an Interprofessional framework. During the 2023-2025 training years, the Bay Pines VA Healthcare System Neuropsychology Postdoctoral Residency Program anticipates that it will provide training for 2 full-time Residents. We are pleased to welcome you to our Medical Center and look forward to reviewing your application for admission.

The Bay Pines VAHCS Neuropsychology Residency Training Program is committed to the scientist-practitioner based model in the delivery of clinical care, clinical research, and professional teaching. We emphasize and demonstrate respect for the individual differences and diversity in the delivery of clinical care, clinical research, and professional teaching. We strive to provide Residents with significant working experience with a variety of clinical populations while simultaneously applying scientific information in the conceptualization, assessment, and treatment of clinical problems. The Neuropsychology Resident is expected to spend 70% time in direct clinical service activities and 30% time engaged in research and learning/teaching activities. We believe that teaching Residents in clinical practice, scholarly thinking, and clinical research design is best received and maintained within a "junior colleague" model of training. Our commitment to the Residents' professional growth and academic development is conveyed in a supportive training atmosphere emphasizing individual strengths. Residents are challenged to use

critical thinking and encouraged toward creative participation in their scientific and clinical endeavors.

A guiding principle in all aspects of service delivery within the program is respect and human dignity for our patients. We emphasize patients' rights, self-determination and the right to choose, including the patient's right to adequate medical, psychological, educational, recreational and other community services, the patient's right to family participation in treatment, and delivery of care with the utmost privacy in the least restrictive environment. We honor cultural, ethnic, sexual orientation, religious, political and gender differences in our patients and deliver services accordingly.

ABOUT THE BAY PINES VA HEALTHCARE SYSTEM

The Bay Pines VA Healthcare System a level 1a, tertiary care facility headquartered in Bay Pines, Fla. Originally opened in 1933, the main medical center is located on 337 acres situated on the Gulf of Mexico approximately eight miles northwest of downtown Saint Petersburg, Fla. Co-located on the medical center campus are a VA Regional Office and a National Cemetery. This area is part of Tampa Bay, the second most populated metropolitan area in the state. The healthcare system operates nine facilities to include the main medical center in Bay Pines and outpatient clinics located in the Florida cities of Bradenton, Cape Coral, Naples, Palm Harbor, Port Charlotte, Sarasota, St. Petersburg, and Sebring. The medical center and its outpatient clinics serve Veterans residing in 10 counties in central southwest Florida. Every year, the Bay Pines VA Healthcare System provides a full range of high quality medical, psychiatric, and extended care services in outpatient, inpatient, Residential, nursing home, and home care settings.

The system is the fifth busiest VA healthcare system in the country in regard to patients treated or served. In FY2016, the organization provided care to 108,909 Veterans (92 percent male, 8 percent female), completed 1.46 million appointments, 26,204 emergency department visits, and 8,838 hospital admissions. Medical care was provided to Veterans of all eras to include World War II, Korean War, Post-Korean War, Vietnam, Post-Vietnam, Persian Gulf (including Operation Enduring Freedom, Operation Iraqi Freedom and Operation New Dawn) as well as other non-combat periods. Age ranges of Veterans served included 80 percent aged 55 and over, 15 percent aged 35-54 and 5 percent aged 30 and under.

The BPVAHCS is affiliated with more than 200 academic institutions representing a broad range of disciplines that provide training leading to certification through Internships and both Postdoctoral Fellowship and Residency training. During FY2015, BPVAHCS hosted a total of 937 Allied Health Trainees and Medical Residents, completing a total of 252 clinical rotations within psychology, social work, medical, dental, optometry, audiology, speech, language pathology, pharmacy, nursing, social work and other affiliated health training programs.

PSYCHOLOGY SERVICE AT BAY PINES

The C.W. Bill Young Medical Center - Bay Pines VAHCS Psychology Staff includes 68 doctoral level Clinical and Counseling Psychologists, 3 Practica students, 7 Interns, 6 Residents, a Psychometrist and one Health Science Specialist. The mission of our facility is to provide high quality psychological services to medical and psychiatric patients within the context of cooperative, multi-disciplinary teams. In addition, the staff is highly committed to the training of new professionals

and is actively involved in our Psychology Training programs. Individual as well as interdisciplinary research opportunities are found throughout the Healthcare System.

Psychology is part of the Mental Health & Behavioral Sciences Service within the organization. The two primary disciplines in the service are Psychology and Psychiatry. The Chief is a Psychiatrist and the Assistant Chief is a Psychologist. Staff psychologists are assigned to a variety of areas throughout the Bay Pines VA Healthcare System, to include the CW Bill Young VA Medical Center, the very large Lee County Healthcare Center, and our Community Based Outpatient Clinics (CBOCs). This diversity in assignment is augmented by diversity among our staff as well with a variety of theoretical orientations, clinical and administrative experiences, multiple research and clinical specialties, and cultural backgrounds.

The two sections of the Psychology Service are managed by psychologists (i.e. Mental Health Residential Rehabilitation Programs and General Psychology). Staff Psychologists participate in various profession-specific and system-wide committees that address issues relating to quality of patient care, efficient delivery of services and development of new programs.

GENERAL PSYCHOLOGY TRAINING COMMITTEE

The General Psychology Training Committee (TC) is responsible for overseeing all levels of Psychology Training Programs on campus. The General Training Committee consists of, at minimum, the following individuals:

Chief, Psychology Service

Training Director, pre-Doctoral Internship Program (Chair)

Training Director, Practica Program

Training Director, General Postdoctoral Residency Program

Training Director, Neuropsychology Postdoctoral Residency Program

Rotation Supervisors for Practica, Internship and Postdoctoral Trainees

Teaching and Research Supervisory Staff

Postdoctoral Residents

Intern Representative

Administrative Training Coordinator

Any Bay Pines Staff Psychologist with a valid Psychology license is potentially able to join the Training Committee and participate in the training programs. All Training Committee members are required to attend monthly seminars targeting ongoing learning/development in the provision clinical supervision; considerations of ethics and legal issues in training and multicultural diversity.

NEUROPSYCHOLOGY TRAINING SUB COMMITTEE

Within the Psychology Training Committee, there is a Neuropsychology Postdoctoral Training Sub Committee, made up of TC staff members privileged in Neuropsychology. Those individuals are responsible for establishing policies pertaining to specialized and advanced training in Neuropsychology. The Neuropsychology Training Sub Committee members participate in the recruitment and selection of new Residents; evaluate and approve Neuropsychology Resident training plans and goals; provide specialty didactic seminars; provide clinical supervision and serve as research Supervisors for Residents; consider any Resident grievances, probation or

remedial plans; and participate in the Neuropsychology Training Programs ongoing self-assessment and quality improvement efforts. Sub Committee consists of, at minimum, the following individuals:

Training Director, Neuropsychology Postdoctoral Residency Program
Neuropsychology Primary Supervisors
Neuropsychology Research Supervisors
Neuropsychology Postdoctoral Residents

2020 COVID-19 PANDEMIC RESPONSE AND PROGRAM ADAPTATIONS

In March of 2020, due to the COVID-19 pandemic, the Bay Pines VAHCS Training Programs, with the unwavering support of medical center leadership, successfully transitioned all previous Intern and Postdoctoral Residency level Psychology Trainees to full or part-time telework while maintaining all training activities without significant disruption. The Training Director worked closely with the Chief of Psychology, Education Service and the Office of Academic Affiliates to put together the plans and structure needed to continue the training program during the national crisis and adhere to facility and state level social distancing and shelter in place mandates. The Training Director followed all revised OAA, APPIC and APA CoA guidelines and rules to maintain a curriculum and training experience that met all program and accreditation requirements. The transition to telework, telesupervision and telehealth practice is considered temporary, and will remain in compliance with flexibilities and allowances approved by facility, accreditation and other governing bodies (e.g. APA CoA, OAA, APPIC) until the national crisis has ended.

For our current academic years (2021-2023) all Psychology Trainees have been given the option to work on campus, where they will be provided with PPE and work accommodations that facilitate CDC recommendations and facility social distancing guidelines and disease prevention measures, or to telework, from their private residence, or select a hybrid of both options. Regardless of whether they work from home, or on-campus, each will continue to gain supervised experiences on clinical rotations via telework telehealth or on-campus telehealth method, for assessment and intervention based practice. They will be able to attend and participate in all staff meetings, interdisciplinary team meetings, seminars, didactics and supervision via virtual media technologies, and benefit from live, direct observation of clinical care by supervising psychologists. All current trainees have access to VHA equipment to support telework, and PPE and private offices for on-campus clinical work. All Trainees have ad hoc telework agreements that will extend until the national crisis has ended.

It goes without saying that the health and safety of our Psychology Trainees, along with the competent care of our nation's veterans, is of utmost importance to us. We feel confident that we can continue to provide high quality training in professional psychology while simultaneously keeping our Trainees' health and wellness at the forefront in the years to come.

VHA ELIGIBILITY REQUIREMENTS FOR NEUROPSYCHOLOGY RESIDENCY PROGRAM

The Department of Veterans Affairs (VA) adheres to all Equal Employment Opportunity and Affirmative Action policies. As a Veterans Health Administration (VHA) Health Professions Trainee (HPT), you will receive a Federal appointment, and the following requirements will apply prior to that appointment:

1. United States Citizenship. VA is unable to consider applications from anyone who is not currently a U.S. citizen.

Citizen verification is required following selection. All Residents must complete a Certification of Citizenship in the United States prior to beginning VA training. We are unable to consider applications from anyone who is not currently a U.S. citizen.

2. U.S. Social Security Number. All VA appointees must have a U.S. social security number (SSN) prior to beginning the pre-employment, on-boarding process at the VA.

3. A male applicant born after 12/31/1959 must have registered for the draft by their 26th birthday to be eligible for any US government employment, including selection as a paid VA trainee. Male applicants must sign a pre-appointment Certification Statement for Selective Service Registration before they can be processed into a training program. Exceptions can be granted only by the US Office of Personnel Management; exceptions are rarely granted.

4. Health Psychology Trainees (HPT)s are subject to fingerprinting and background checks. Match result and selection decisions are contingent on passing these screens.

5. Drug Screening. The VA conducts drug screening exams on randomly selected personnel as well as new employees. Residents may be required to be tested prior to beginning work, and once on staff, they are subject to random selection as are all other clinical staff. Institutional policies on allowed prescription medications are based on federal government requirements for employment at a VA facility, not on local or state level rules and guidelines. While Medical Marijuana is legal at the “state” level in Florida, it is not sanctioned by the Federal Government for use by Federal Employees. Use of unlawful substance could result in ineligibility of hire and/or dismissal from program. Please contact the HR department for any questions on this. Please open link for Drug Free Workplace Policy:

https://www.va.gov/OAA/onboarding/VHA_HPTsDrug-FreeWorkplaceOAA_HRA.pdf

6. VA training occurs in a health care setting. Some of the patients served by VA are elderly or infirm and could succumb to common illnesses like influenza. It is important to be able to document that your vaccinations are up to date and that you have been screened for active tuberculosis prior to starting your training at VA. Securing a statement from your current occupational health physician, regular health provider, or an urgent care clinic can expedite your appointment. Additionally, maintaining a current flu vaccination during the training years (or taking additional preventative measures to limit patient exposure to the flu) may be required. Please discuss this with the TD after you have matched and well before to your start date to facilitate your onboarding.

7. On August 12, 2021 VHA mandated that all Hybrid Title 38 employees, to include Health Psychology Trainees (HPT)s receive and provide proof of the COVID-19 vaccine or have an exemption filed (medical or religious) with the Designated Education Officer as a condition of VA appointment.

<https://vaww.va.gov/vaforms/medical/pdf/VA%20Form%2010-263%20COVID-19%20Vaccination.pdf>

<https://www.cdc.gov/vaccines/adults/rec-vac/hcw.html>

8. Residents must have completed all doctoral requirements and have record of degree conferral prior to starting the program. Only graduates from an American Psychological Association (APA) or Canadian Psychological Association (CPA) accredited graduate program in Clinical, Counseling, or Combined psychology, or Psychological Clinical Science Accreditation System (PCSAS) accredited program in Clinical Science will be considered. Persons with a doctorate in another area of psychology who meet the APA or CPA criteria for re-specialization training in Clinical, Counseling, or Combined Psychology may also be eligible.

9. Residents must have completed an internship program accredited by the APA Commission on Accreditation or have completed a VA-sponsored internship that is in the process of seeking accreditation to be eligible.

Health Professions Trainees (HPTs) to include Neuropsychology Residents, are appointed as temporary employees of the Department of Veterans Affairs. As such, HPTs are subject to laws, policies, and guidelines posted for VA staff members. There are infrequent times in which this guidance can change during a training year which may create new requirements or responsibilities for HPTs. If employment requirements change during the course of a training year, HPTs will be notified of the change and impact as soon as possible and options provided. The Training Director will provide you with the information you need to understand the requirement and reasons for the requirement in timely manner.

Pre-Training Certification Process - Training Qualifications and Credentials Verification

Letter (TQCVL): Unlike conventional professional staff who have their credentials verified by VETPRO and other means and may go thru an extensive pre-employment physical examination, Residents have their readiness to train verified by the Residency TD or other authorized OAA/Education Service personnel. The Residency TD or authorized personnel fills this form out based on review of submitted physical and health documents by the trainee. Under state and federal rules, trainees have had to receive recommended vaccinations and other health screenings prior to beginning their Residency. All trainees must have a Training Qualification Verification Letter on file prior to initiating Residency Training. The TQCVL serves three purposes: First, the TD or authorized personnel indicates that the trainee has completed academic requirements and is thus ready for this new level of responsibility/training. Second, to the fullest extent possible, the TD or authorized personnel will review submitted health documents to determine that the trainee is physically fit for duty. Third, to the fullest extent possible, the TD or authorized personnel will review the submitted health documents to determine if the trainee is psychologically healthy and able to undertake this new level of responsibility/training.

Physical Examination and Finger Printing/Background Check

Prior to initiation of Residency, all incoming Trainees must go through a physical examination with Occupational Health. Often, with the properly executed TQCVL, this will involve only having the TQCVL reviewed by the Occupational Health clinician, followed by a discussion of any additionally needed screenings/vaccinations required to work in a healthcare setting. Physical Examination appointments must be conducted prior to initiating Residency and are coordinated through Human Resources. They can occur at a local VHA facility near your current place of employment or your current Internship, or at the Bay Pines VAHCS.

Fingerprint Screening and Background Investigation. Residents are subject to fingerprinting and background checks and must meet all institutional and federal government requirements for employment at a VA facility. Match result and selection decisions are contingent on passing these screens. All incoming trainees must complete finger printing and a background check prior to initiating Residency. This is arranged once the trainee has completed their OAA Mandatory Training for Trainees (MTT) and submitted the online forms to the Bay Pines OAA Education Service representative and HR Specialist. Once approved, the facility can initiate the ePAS (Electronic Permission Access) and PIV (personal Identity Verification) cards that will ultimately, allow your computer and medical record access.

APPLICATION PROCESS

The Bay Pines VAHCS Neuropsychology Postdoctoral Residency Program welcomes and strongly encourages applications from all qualified applicants, regardless of racial, ethnic, sexual orientation, disability, age, or other minority status. The expectation is that the selected applicant will possess his or her doctorate prior to the start date of Residency.

The application procedure begins with a letter of interest. Your letter should describe: your reasons for applying to the program, your status regarding completion of doctorate degree (including date/anticipated date for dissertation defense), your experience with Neuropsychological Assessment and Rehabilitation (including populations with which you have experience), and your areas of clinical research interest.

Application packets must be complete by JANUARY 2, 2023. Earlier submissions are preferred. We plan to participate in the APPCN Resident Matching Program.

SELECTION PROCEDURES:

Applications will be reviewed by the Neuropsychology Training Staff and current Residents. Selected candidates will be invited to interview with (2) Neuropsychology Staff members. Invitations for interviews will be made by the Training Director or designee. The Residency Program will also notify applicants when a decision is made that we are unable to extend an interview offer. Until the Residency Program notifies an applicant of an interview offer or informs them that an offer will not be forthcoming, applicants should consider their candidacy to be active.

For the 2023-25 academic training period, we ANTICIPATE interviews will be conducted at the annual INS convention in person and/or virtually using video conferencing (e.g. zoom) or telephone, in late January – early February 2023 (exact date range to be determined). Interview dates and times will be arranged based on candidate and staff availability/preference. We will also hold a virtual OPEN HOUSE day during this time period (date TBD). The Open House will be conducted via Zoom from 12:00-4:00 p.m. EST. We will provide a program overview with the TD, followed by Neuropsych staff introductions and rotation presentations and Q&A with our training staff, slide shows of our larger Tampa Bay community, medical campus, Resident offices and clinical program areas, and a meet and greet Q&A with our current Postdoctoral cohort. If a candidate would like an in-person tour of the facility, it can be arranged (but it is NOT required or expected and will not be a factor in selection).

Following interviews, the selection committee will rank order applicants. We plan to participate in the APPCN Resident Matching Program. This Residency site agrees to abide by the APPCN Match Policy that no person at this facility will solicit, accept, or use any ranking-related information from any Residency applicant. Details of the National Match can be found at [https://www.natmatch.com/appcnmat/applanding.html](https://www.natmatch.com/appcnmat/appllanding.html)

APPLICATION DUE DATE: JANUARY 2, 2023

How to apply: Please submit the following via email in pdf format:

1. A letter of interest (cover letter)
2. Curriculum Vitae that includes detailed descriptions of training, experience, research and other relevant activities
3. Three letters of recommendation, each sent directly from the letter writer
4. All doctoral level academic transcripts
5. Application for Associated Health Occupations (10-2850C); available at <http://www.va.gov/vaforms/medical/pdf/vha-10-2850c-fill.pdf>
6. A letter (or APPCN form) from the chair of your dissertation committee that details the status of your dissertation (including anticipated completion date).
Your doctoral degree must be completed before the start date of your postdoctoral training.

The materials must be received by application due date. They must be emailed to:

Zoe Proctor-Weber, PsyD, PhD, ABPP-CN
Neuropsychology Training Director
Zoe.Proctor-Weber@va.gov

Finally, applicants are reminded that they should feel free and are welcome to contact the Neuropsychology Training Director to discuss any issue of relevance. Please contact Zoe Proctor-Weber, PhD at Zoe.Proctor-Weber@va.gov or by phone at (727) 398-6661 x14678.

If you have any specific questions related to eligibility requirements for Federal Employment, please contact Human Resources at 727-398-6661 x 15663

For further information, please contact us by email:

vhabaypsychologytraining@va.gov
Psychology Training Programs at Bay Pines
Associate Chief of Mental Health Service, Chief of Psychology Service
Ronald Braasch, PhD.

Mental Health and Behavioral Science Service (116)

Physical Address:
C.W. Bill Young VA Medical Center
Bay Pines VA Healthcare System
10000 Bay Pines Blvd
Bay Pines, FL 33744

BAY PINES PSYCHOLOGY TRAINING PROGRAMS COMMITMENT TO DIVERSITY

DIVERSITY STATEMENT

The Bay Pines VAHCS serves Veterans who represent a wide variety of dimensions of diversity, including but not limited to gender, race, ethnicity, sexual orientation, physical ability, regional affiliation, age, and religious/spiritual orientation. The Bay Pines VA's Psychology Training Programs are deeply committed to the appreciation of diversity and the development of multicultural competence. During the training year, Residents continue to build on their graduate training in expanding their awareness, knowledge, and skill set to enhance multicultural competence through a variety of experiences. These include diversity-focused presentations, readings, learning activities; engagement in directed study, research and/or QS/PI projects; discussions with Supervisors, peers, and other clinical staff; and direct provision of services to Veterans with diverse backgrounds. The overall goal of diversity-related training activities is the promotion of social justice and multicultural competence within the mental health profession and society as a whole.

MULTICULTURAL DIVERSITY SUB COMMITTEE

The Multicultural Diversity Sub Committee for the Psychology Training Programs, functions as an extension of the General Psychology Training Committee to assist Psychology Trainees in developing multicultural competencies, appreciating diversity in all its forms, and promoting social justice. Within its roles with the Psychology Training Programs, the Multicultural Diversity Sub Committee for Psychology Training seeks to cultivate an environment that supports open and respectful dialogue, exchange of ideas, and self-reflection. It is composed of Bay Pines VA Psychologists and Psychology Trainees who are invested in helping to promote multicultural competence for working with a highly diverse patient population and to explore how, as mental health professionals, our individual differences, worldview, biases, theoretical framework, and life experiences affect our clinical work. In conjunction with the Training Committee, the Multicultural Diversity Sub Committee facilitates the Multicultural Training Seminar Series and its associated experiential / immersion activities.

In keeping with the APA Code of Ethics (2010), the Bay Pines Neuropsychology Postdoctoral Residency Training Program does not require Residents to disclose personal information in program-related activities. At the same time, the program recognizes that self-reflection is an important part of the process and is a crucial aspect of developing multicultural competence. The program also acknowledges that developing insight into our own identities and personal histories is a delicate process – one that is best accomplished within a nurturing, non-judgmental context. The Multicultural Diversity Sub Committee along with the core General Training Committee works to provide such an environment, with hopes that all will feel comfortable engaging in the self-reflection necessary to develop a meaningful appreciation for diversity in all its forms. In an effort to create a supportive and constructive learning environment, personal disclosures made by participants as part of their diversity training will be treated sensitively and respectfully AND by including all levels for facilitation we hope to create working relationships in which everyone will feel safe exploring personal feelings, thoughts, beliefs, and life experiences that affect their multicultural competencies.

For further information about the Multicultural Diversity Sub Committee and Training Seminar, please contact the Co-Chairs by email:

Jennifer.Presnall-Shvorin@va.gov

Arian.Marquez@va.gov

Co-Chairs, Multicultural Diversity Sub Committee
Mental Health and Behavioral Science Service (116)

Physical Address:

C.W. Bill Young VA Medical Center
Bay Pines VA Healthcare System
10000 Bay Pines Blvd
Bay Pines, FL 33744

NEUROPSYCHOLOGY POSTDOCTORAL RESIDENCY PROGRAM SPECIFICATIONS

TRAINING MODEL

Within the Bay Pines VAHCS Clinical Neuropsychology Postdoctoral Residency Program, we offer and implement a specialty practice training program in Clinical Neuropsychology within an interprofessional context. We identify with and conceptualize from a scientist-practitioner model.

TRAINING AIM

The primary aim of the program is to prepare early career Neuropsychologists for entry level positions in Neuropsychology within the VHA equivalent of a GS13, or a community/academic medical center within the context of interprofessional practice who will ultimately be prepared to apply for board certification in Clinical Neuropsychology. The 2-year program is designed to promote clinical specialization in the field of Neuropsychology through advanced training that is consistent with the American Psychological Association, Division 40 Houston Conference Guidelines and the American Board of Professional Psychology (ABPP). The Resident's duties would be centered in clinics at the Bay Pines VAHCS. Structurally, the Neuropsychology Postdoctoral Training Program will consist of two core rotations and one minor rotation. The structure of the 2-year training program will allow for two full time Residents to alternate between the offered core rotations during year 1 and year 2. These duties involve activities in both core mental health settings and medical care clinics/team settings.

Over the course of two years, Neuropsychology Residents will be challenged to build on their past experiences and think autonomously. Across all clinical training experiences, the Residents will gain advanced specialty training in the administration, interpretation and feedback of neuropsychological evaluation through the use of an evidence based, flexible and hypothesis-testing method. Clinical, educational and research activities will promote the Resident's knowledge base of neuroanatomy, neuropathology, psychopharmacology, neuro-ophthalmology and neuroradiology. Residents will also be involved in the implementation of psychoeducational and cognitive rehabilitation strategies from a team based, interprofessional model of care that is patient centered. The two-year format readily accommodates repeated encounters that build and sustain relationships with staff in all clinical areas and promotes the opportunity for interprofessional collaboration fostered by observed competence and collaboration. Postdoctoral Residents are "fresh eyes" in areas of long-standing protocols and procedures. As such, they are ideal for participation in performance improvement initiatives and can experience first-hand the process improvement and outcome measurement activities.

In fulfillment of these aims, graduates of our Postdoctoral Residency will demonstrate advanced practice competency in the following areas:

LEVEL I COMPETENCIES.

GENERAL ADVANCED COMPETENCY AREAS AT THE POSTDOCTORAL LEVEL.

Consistent with all postdoctoral psychology training programs, we emphasize the development of core competencies encompassing respect for the individual differences and cultural diversity in the delivery of evidence based clinical care, clinical research, and professional teaching. We strive to provide Residents with significant breadth and depth of experience working with a variety of clinical populations while simultaneously applying an approach utilizing scientific information in the conceptualization, assessment, and treatment of clinical problems:

Competency 1. Integration of Science and Practice

1a) Psychological assessment

Residents should be able to appropriately assess, evaluate and conceptualize a broad range of patients, including those with complex presentations and complicated co-morbidities. Selection and use of assessment tools and/or evaluation methods should be appropriate to the clinical needs of the patient and the clinical setting, and responsive to the needs of other professionals. Assessment should be practiced in a culturally competent manner, and conducted with an awareness of current ethical, legal and professional standards.

Benchmark elements associated with this Competency include:

- Diagnostic skill
- Case conceptualization and treatment goals/recommendations
- Psychological test selection, administration, and interpretation
- Psychological assessment writing skills

1b) Treatment, intervention and consultation

Residents should demonstrate the ability to effectively work with diverse populations and provide appropriate intervention in response to a range of presenting problems and treatment concerns. They should also demonstrate skill in applying and/or adapting evidence-based interventions with a specialized population and be able to provide clinical leadership when working with junior providers. Residents should demonstrate effective consultation skills with other professionals and may provide counsel regarding difficult clinical matters in areas of their expertise.

Benchmark elements associated with this Competency include:

- Assessment feedback
- Patient rapport
- Patient risk management
- Individual or family therapeutic interventions
- Group therapy skills and preparation
- Organization management: efficiency and time management
- Organization management: documentation

1c) Teaching and clinical supervision

Residents should demonstrate the ability to provide professional presentations in a formal didactic setting; to teach skills to interdisciplinary medical faculty, students, residents and allied health professionals. Residents in medical center training settings; and/or to educate and support other professionals in medical center settings. Residents may also demonstrate the ability to use telemedicine and other technological modalities to provide

mental health consultation to remote clinical sites; and may demonstrate emerging mentoring skills by providing consultation to junior trainees. Residents should demonstrate emerging skills in the provision of clinical supervision, as well as knowledge of, and sensitivity to, ethical, legal, and cultural issues in providing supervision.

Benchmark elements associated with this Competency include:

- Supervisory skills
- Teaching skills

1d) Scholarly inquiry, review of relevant literature, research design, execution of research, monitoring progress, evaluation of outcomes, communication of results.

Residents should demonstrate the ability to base clinical decisions on the scientific literature, and to generate evidence-based principles to guide practice in areas that lack an empirical literature. Residents should demonstrate the general ability to formulate testable and meaningful research hypotheses; to design and carry out studies to test these hypotheses; to present research findings in professional forums and/or to publish data resulting from independent or collaborative work; to participate as a contributing member to a research group; and/or to prepare a grant proposal for submission. Residents should demonstrate knowledge of, and sensitivity to, general ethical, legal, and cultural issues in the conduct of research. Residents should demonstrate an awareness of the limitations and cautions in translating evidence-based practices to individual cases, particularly in non-majority populations.

Benchmark elements associated with this Competency include:

- Seeks current scientific knowledge
- Implementing research designs
- Protection of human subjects and ethical issues
- Publishing and presenting research findings

Competency 2. Individual and Cultural Diversity

Residents should demonstrate a knowledge of the VA health care and mental health care system, including economic, legal and socio-cultural aspects of health care delivery. They should show awareness of, and sensitivity to individual differences and systemic issues that impact the delivery of services, especially those that involve other professionals and disciplines. Exhibits knowledge, awareness and sensitivity to marginalized populations and individuals.

Benchmark elements associated with this Competency include:

- Sensitivity to patient diversity and individual differences
- Awareness of own cultural and ethnic background

Competency 3. Ethical and legal

Residents should demonstrate continued growth in professional development and identity. In accordance with their level of training, Residents should assume increasing professional responsibility for patient care, consultation, research and teaching activities. They should demonstrate advanced knowledge in ethical, legal and cultural issues related to all of the above objectives and conduct themselves in accordance with these principles and with current professional standards.

Benchmark elements associated with this Competency include:

- Knowledge of ethics and law
- Consumer protection

- Seeks consultation/supervision
- Uses positive coping strategies

LEVEL II. PROGRAM SPECIFIC COMPETENCIES

Competency 4. Interprofessional collaborative practice

As defined by the Inter-professional Education Collaborative; Residents should exhibit the ability to work with individuals of other professions to maintain a climate of mutual respect and shared values. The Resident uses the knowledge of his/her own role and those of other professions to appropriately assess and address the healthcare needs of the patients and populations served. The Resident exhibits effective communication skills with patients, families, communities, and other health professionals in a responsive and responsible manner that supports a team approach to the maintenance of health and the treatment of disease. The Resident is able to successfully apply relationship-building values and the principles of team dynamics to perform effectively in different team roles to plan and deliver patient-/population-centered care that is safe, timely, efficient, effective, and equitable.

Benchmark elements associated with this Competency include:

- Inter-professional teamwork
- Use of interprofessional leadership skills
- Professional interpersonal behavior
- Maintains appropriate personal boundaries with colleagues and patients

LEVEL III. NEUROPSYCHOLOGY SPECIALTY COMPETENCIES

Residents will have adequate exposure to clinical experience and structured learning activities to develop the fund of knowledge necessary to specialize in Neuropsychology, as defined by the APA Division 40 Houston Guidelines. This is described as the application of assessment and intervention principles based on the scientific study of human behavior across the lifespan as it relates to normal and abnormal functioning of the central nervous system. Residency education and training is designed to provide clinical, didactic and academic training to produce an advanced level of competence in the specialty of Clinical Neuropsychology and to complete the education and training necessary for independent practice in the specialty.

Competency 5. Foundations for the study of brain behavior relationships

In order to prepare Residents to assume entry level positions in the subspecialty practice of Neuropsychology within the VHA equivalent of a GS13, or a community/academic medical center and who will be prepared to apply for board certification in Clinical Neuropsychology, Residents will achieve competency in the study of brain behavior relationships.

Benchmark elements associated with this Competency include:

- Functional neuroanatomy
- Neurological and related disorders
- Non- neurologic conditions affecting central nervous system functioning
- Neuroimaging and other neurodiagnostic techniques
- Neurochemistry of behavior
- Neuropsychology of behavior

Competency 6. Foundations for the practice of clinical neuropsychology

In order to prepare Residents to assume entry level positions in the subspecialty practice of Neuropsychology within the VHA equivalent of a GS13, or a community/academic medical center and who will be prepared to apply for board certification in Clinical Neuropsychology, Residents will achieve competency in foundations for the practice of clinical neuropsychology.

Benchmark elements associated with this Competency include:

- Specialized neuropsychological assessment techniques
- Specialized neuropsychological intervention techniques
- Research design and analysis in neuropsychology
- Professional issues and ethics in neuropsychology
- Practical implications of neuropsychological conditions

PROGRAM STRUCTURE - NEUROPSYCHOLOGY CORE CLINICAL ROTATIONS

1a. Outpatient Physical Medicine and Rehabilitation (PM&R) Polytrauma Traumatic Brain Injury (TBI) Major (2.5 days per week):

The unique nature of polytrauma injuries creates the need for an interprofessional polytrauma program to handle the medical, psychological, rehabilitation, and prosthetic needs of these individuals. The Bay Pines VAHCS Polytrauma TBI Rehabilitation Service utilizes an interprofessional team-based approach to provision of patient centered outpatient services. The interprofessional team consists of a psychiatrist, speech language pathologist, occupational therapist, physical therapist, social worker, audiologist, nurse practitioner and a neuropsychologist. The treatment of polytrauma injuries requires a flexible, innovative approach that involves shared decision making. The interprofessional team meets weekly to promote patient centered goal setting, health behaviors and self-management. The polytrauma rehabilitation environment is fast-paced and exciting, with immense opportunity to contribute to this burgeoning field. Residents can anticipate participation in the following activities based on individual training plan:

- Conduct outpatient comprehensive neuropsychological evaluations
- Conduct intervention feedback sessions in person, with family and/or with use of Telehealth Video on Demand
- Manage and participate in the mTBI Assessment Clinic w/supervision of psychometrist
- Conduct Individual or Group based outpatient mTBI Cognitive Rehabilitation
- Attend and participate in weekly Physical Medicine and Rehabilitation (PM&R) Polytrauma TBI IPT meetings
- Attend and participate in PM&R Polytrauma IPT family conferences
- Complete mTBI eConsults
- Provide vertical supervision of Neuropsychology Intern and Practica students
- Engage in 2 hours of individual supervision within Neuropsychology

1b. Inpatient Physical Medicine and Rehabilitation (PM&R) Comprehensive Integrated Inpatient Rehabilitation Program (CIIRP) Team Minor (1.5 day per week)

PM&R Comprehensive Integrated Inpatient Rehabilitation Program (CIIRP) Team utilizes an interprofessional team-based approach to provision of patient centered inpatient services. The interprofessional team consists of a physiatrist, speech language pathologist, occupational therapist, physical therapist, pharmacist, social worker, nurse and a neuropsychologist. The nature of inpatient rehabilitation also requires flexible, innovative treatment approaches that involve shared decision making. The interprofessional team meets weekly with patients and

families to promote patient centered goal setting, health behaviors, self-management, and the highest possible level of independence. The inpatient rehabilitation environment is fast-paced and exciting, with immense opportunity to contribute to this burgeoning field. Residents can anticipate participation in the following activities based on individual training plan:

- Tuesday morning rounding with the psychiatrist.
- Wednesday morning participation in Inpatient PM&R CIIRP IPT meetings.
- Conducting inpatient neuropsychological assessment of selected rehabilitation patients.
- Providing individual cognitive rehabilitation treatment, supportive interventions (e.g. mirror imagery, guided imagery, relaxation, thermal or heart rate biofeedback), and feedback sessions.
- Specialized training in three arms of rehabilitation:
 - a. Assessment and Intervention following acute or subacute Moderate to Severe TBI and/or CVA, or post-Covid neurological complications.
 - b. Assessment of learning/memory to inform amputee treatment and prosthetic planning.
 - c. Driving ability battery/correlates.

2a. Outpatient memory disorders (Geriatrics) major (3 days per week):

The primary clinical role of the Neuropsychology Postdoctoral Resident in this rotation is to provide a variety of assessment and consultation services on an outpatient basis. The general purpose of such evaluation is to determine potential disruption of general cognitive and behavioral function secondary to neurologic disease; identification of specific neurobehavioral deficits, and identification of critical areas of dysfunction which relate to level of independence, future planning or rehabilitation potential. Residents can anticipate participation in the following activities based on individual training plan:

- Conduct outpatient comprehensive neuropsychological evaluations
- Conduct intervention feedback sessions in person, with family and/or with use of Telehealth Video on Demand
- Management and participation in the Memory Disorder Screening Clinic w/supervision of psychometrist
- Conduct Individual or Group based Cognitive Rehabilitation
- Provide vertical supervision of neuropsychology Intern and Practica students
- Engage in 2 hours of individual supervision within neuropsychology

2b. Inpatient medical psychiatry consultant/liaison geriatric minor (1 day per week)

The inpatient Consultant/Liaison Minor involves rounding and bedside assessment with the inpatient Psychiatry Team within the inpatient medical units (i.e. Neurology, Telemetry, MICU and Surgery). The Inpatient Psychiatry Team includes a psychiatrist, ARNP, social worker, Neuropsychologist and MS-III medical student. Residents will practice in the role of consultant/liaison in the medical management of acute and long-term medical and mental health illness. Bedside cognitive screenings, capacity evaluations and suicide risk screens are common daily activities. On this rotation, the Resident will develop an advanced Psychopharmacological knowledge including indications & contraindications for psychotropic medications, adverse effects, drug interactions, and iatrogenic illness; Learn approaches, components, and nuances to assessing capacity in adult patients; Tailor and conduct neuropsychological evaluations for the purposes of screening geriatric inpatients for treatment and discharge/placement planning; Develop and apply a working knowledge of and sensitivity to multicultural diversity issues (e.g.,

ethnic, racial, religious, political, age, gender, sexual orientation, and disability factors) that intersect in medical inpatient settings.

3. Neurology Clerkship (6 weeks)

Residents will complete a 6 week Neurology clerkship toward the end of their first year. This is a full-time experience that will be completed within Neurology Service. Residents will be released from primary Neuropsychology responsibilities during this time. As an overview, the Neurology clerkship is a 6 week didactic and practical experience involving third year medical students from surrounding universities (e.g., University of Central Florida, University of South Florida).

Residents will work closely with the Neurologists and MS-III's during this experience.

There are a variety of opportunities on this clerkship. Primarily, Residents will work with the on-call Neurologist on an inpatient basis. This provides the opportunity to work with multiple Neurologists across the six weeks and exposure to a diverse population experiencing CNS and PNS disorders in their acute phases and during the early stages of resolution. Additionally, Residents have the opportunity to shadow Neurologists and a Neuro-ophthalmologist during outpatient evaluations. Residents will also work closely with third year medical students. Together with medical students, Residents receive and staff inpatient consults, evaluate patients (includes obtaining history and neurologic exam), and discuss the findings with the Neurologist. Didactic information is provided regarding various diagnoses, etiology, and treatment recommendations should the students and/or Residents have limited knowledge of a particular disease process. Disease processes that will likely be encountered include, but are not limited to: seizure, syncope, CVA, TIA, autoimmune diseases, neuromuscular diseases, dementia, Parkinson disease, Parkinson plus syndromes, migraine, and brain injury. In addition to learning how to conduct a neurologic exam, Residents will also have the opportunity to learn/review EEG, EMG, and neuroimaging (MRI, CT).

MORNING NEUROPSYCHOLOGY TEAM STAFFING MEETINGS

Neuropsychology staff and Residents (and Interns and Practica Trainees on rotation) meet twice a week (Tuesdays and Thursdays) from 8:00-8:30 for Research Update Meetings and Case Presentations.

Case Presentations in Neuropsychology Staffing Meetings

8:00-8:05am – up to 5 minutes to log in/arrive and handle any administrative or clinic staffing issues

8:05am-8:20am – 1 Neuropsychology Practicum student, Intern, or Resident (alternating schedule) presents their case for that day (1st quarter/rotation) or a recent case that has already been seen (2nd quarter/rotation).

1st Quarter/Rotation – Initial Staffing of a New Case (August through October)

10 to 15 minute presentations would include approximately...

- 5-10 minutes of background information (i.e., referral source, demographics, HPI, medical history, psychiatric history, and psychosocial history) gleaned from EMR
- 3-5 minutes to discuss possible r/o and differential diagnoses
- 5 minutes to discuss plan for testing battery (e.g. flexible battery you are planning on giving, anticipated barriers to testing and how to manage them – vision, motor, hearing, etc...)

2nd Quarter/Rotation – Interesting or Complicated Case Presentation (November – January)

10 to 15 minute presentations would include approximately...

- 5 minutes of background information (i.e., referral source, demographics, HPI, medical history, psychiatric history, and psychosocial history)
- 3-5 minutes to discuss preliminary differential diagnoses
- 10 minutes to present/discuss the testing data, their conceptualization, impressions (discuss how you ruled out other differentials), diagnosis and recommendations

8:20-8:30 – time for questions, comments, and suggestions from other staff and Trainees

The individual presenting will make email/copies of the data sheet for the other individuals (staff and Trainees) present.

Guidelines for the Presentations Format:

1. Basic Demographics
2. Reason for Referral / Referral Question/History of Present Illness
3. Relevant History
 - a. Developmental / Educational / Occupational / Military / Social / Marital / Legal
 - b. Medical / Neurological / Family Medical History
 - c. Psychiatric/Sleep/Pain
 - d. Substance Abuse / Dependence
 - e. Social / Interpersonal / Occupational / Academic Functioning
4. Current Functioning
 - a. Cognitive Complaints
 - b. ADLs / IADLs
 - c. Treatment / Rehabilitation and Response
 - d. Third Party information (if applicable)
5. Current Medical Issues
 - a. Diagnosed Medical Conditions
 - b. Complaints (e.g., pain, sleep, sensorimotor)
 - c. Mood / Affect / Personality Change
 - d. Medications / Drugs
 - e. Neuroimaging
 - f. Pertinent Labs
6. Behavioral Observations (during evaluation) / MMSE/MS3/MoCA
7. Other Pertinent Background Information as Appropriate
8. Differential Diagnoses
9. Neuropsychological Test Results
10. Case Formulation
 - a. Diagnosis
 - b. Treatment/Management
 - c. Recommendations/Plan

Trainees will be responsible for obtaining coverage in case they are off/sick on a day they are scheduled to present

Research Update Thursdays

- The first Thursday of the month will focus on a research update. This will allow real-time discussion regarding active and proposed research projects with staff investigators and research supervisors. 8:05-8:30 a.m. first Thursday of the month.

February through July

For the second half of the academic year, Residents and Staff will use the daily staffing time as professional consultation time. Residents and staff will bring current cases that are diagnostically challenging, involve legal issues, ethical considerations, or some other clinical or procedural concern that is related to clinical care or professional development. There will be routine practice of mini FFC and ethical vignettes targeting preparation for Board Certification examination.

CLINICAL ROTATION ADMINISTRATION

At the beginning of each rotation, Residents will meet with their Primary Supervisor and Interprofessional Supervisor for Rotation Orientation and development of individualized goals. Individualized goals will include specified targets related to both their Major Outpatient and Minor Inpatient Rotations. Supervisors will complete a Change of Rotation Form at the end of Year I.

2 Year Neuropsychology Training Outline

Core Clinical Rotations 70%	Research; Supervision; Didactics 30%
YEAR 1 MAJOR OUTPATIENT PM&R POLYTRAUMA TBI Rotate 2.5 days per week. Conduct outpatient Neuropsychological evaluations Conduct Intervention Feedback Sessions Manage mTBI Assessment Clinic w/supervision of psychometrist Provide Individual and Group based Cognitive Rehabilitation Member of weekly PM&R Polytrauma TBI Interprofessional Team (IPT) Participate in weekly PM&R Polytrauma TBI IPT family Meetings Conduct eConsults for mTBI Provide vertical supervision for TBI/Rehab NP Intern or practica student	MONDAYS YEAR ROUND Multi-site Neuropsychology Didactic- in collaboration with 10 VHA Medical Center training sites, Residents will participate in weekly VTEL didactics. Hour 1 Case Conference/ABCN Fact Finding Exercise. Hour 2 Reading Seminar/Didactic (Neuroanatomy/pathology/psychology) Competencies: Teaching; Psychological Assessment; Foundations for the study of brain behavior relationships; Foundations for the practice of Clinical Neuropsychology WEDNESDAYS YEAR ROUND Medical Grand Rounds/Neurology Seminar Medical GR-Attended by all Medical and Allied Health staff Neurology Seminar-Attended by Neuropsychology, Neurology, Radiology, SLP Collaborative Competencies: Foundations for the study of brain behavior relationships; Interprofessional Collaborative Practice; Teaching.
YEAR 1 MINOR PM&R CIIRP INPATIENT REHABILITATION	THURSDAYS YEAR ROUND ABPP-CN Seminar

<p>Rotate 1.5 day per week as Consultant/Liaison for Inpatient PM&R CIIRP</p> <p>Conduct bedside Neuropsychological evaluations, provide therapy and CRT within the PM&R inpatient rehabilitation unit.</p> <p>Medical Rounds with Inpatient PM&R Staff</p> <p>Attend inpatient IPT meetings.</p>	<p>Weekly didactic series targeting Level III competencies in Neuropsychology for board certification preparation</p> <p>Competencies: Teaching; Foundations for the study of brain behavior relationships; Foundations for the practice of Clinical Neuropsychology</p>
<p>YEAR 2 MAJOR</p> <p>OUTPATIENT MEMORY DISORDER (GERIATRIC)</p> <p>Rotate 3 days per week.</p> <p>Conduct outpatient Neuropsychological evaluations.</p> <p>Conduct Intervention Feedback Sessions</p> <p>Manage and participate in the Memory Disorder Screening Clinic w/supervision of psychometrist</p> <p>Conduct Individual and Group based Cognitive Rehabilitation</p> <p>Provide vertical supervision for Memory Disorder NP Intern or practica student</p>	<p>FRIDAYS YEAR ROUND</p> <p>Postdoctoral Peer Consultation</p> <p>Attended by neuropsych and generalist postdoctoral residents.</p> <p>Competencies: Professional Development</p> <p>Research Journal Club</p> <p>Attended by Psychology staff, Residents, Interns, Practica students</p> <p>Competencies: Integration of Science and Practice; Teaching and Clinical Supervision</p> <p>Multicultural Diversity and Ethics Seminar</p> <p>Attended by TC Staff and Residents (monthly)</p> <p>Competencies: Individual and Cultural Diversity; Ethics and Legal</p> <p>Supervision of Supervision</p> <p>Attended by Residents and Staff (monthly)</p> <p>Competencies: Supervision, Ethics and Legal</p> <p>Neurology Didactic (during clerkship)</p> <p>Interprofessional attendance, led by Neurology Service</p> <p>Competencies: Interprofessional Collaborative Practice; Foundations for the study of brain behavior relationships; Teaching</p>
<p>YEAR 2 MINOR</p> <p>Inpatient Consultant/Liaison Geriatric focus</p> <p>Rotate 1 day per week as Consultant-Liaison with Medical Inpatient Psychiatry</p> <p>Conduct bedside Neuropsychological evaluations, capacity evaluations and suicide screenings within inpatient medical units.</p> <p>Medical Rounds with Inpatient Psychiatry Team</p> <p>6 week Neurology Clerkship</p>	<p>RESEARCH PROJECT</p> <p>Year 1: Develop proposal, IRB, data collection</p> <p>Year 2: Data analysis; presentation and publication submission</p> <p>Competencies: Integration of Science and Practice</p>

Resident(A) Year 1	Resident(B) Year 1	Resident(A) Year 2	Resident(B) Year 2
MAJOR Outpatient Polytrauma-TBI OEF/OIF/OND	MAJOR Outpatient Memory Disorder (Geriatrics)	MAJOR Outpatient Memory Disorder (Geriatrics)	MAJOR Outpatient Polytrauma-TBI OEF/OIF/OND
MINOR Inpatient Consultant- Liaison PM&R CIIRP Rehab focus	MINOR Inpatient Consultant- Liaison Medical Psychiatry Geriatrics focus Neurology Clerkship	MINOR Inpatient Consultant- Liaison Medical Psychiatry Geriatrics focus Neurology Clerkship	MINOR Inpatient Consultant- Liaison PM&R CIIRP Rehab focus

SUPERVISION AND TRAINING METHODS TO ACCOMPLISH PROGRAM AIMS AND COMPETENCIES

Within this learning/teaching environment, Residents are expected to provide clinical services to patients and spend the majority of their time (70%) engaged in direct patient services and clinical supervision. They will spend the remaining time (30%) engaged in structured learning activities, teaching and research.

CLINICAL SUPERVISION

All clinical activities of Neuropsychology Postdoctoral Residents are supervised by the licensed Psychologist(s) serving as the Primary Neuropsychology rotation Supervisor(s), and the designated Interprofessional Doctoral Level Licensed Medical Provider of their minor rotation (i.e. Psychiatrist, Physiatrist or Neurologist). Frequency of supervision will vary depending on the activities and skills of the Resident, but a minimum of four hours of formal supervision will be arranged each week as mandated by APA and VHA guidelines. Of these four hours a minimum of two hours per week will be regularly scheduled individual, face to face clinical supervision with a Licensed Psychologist serving as their Primary Neuropsychology Supervisor to meet state licensure requirements for postdoctoral training. One hour a week will be in a group format with the Training Director. While on rotation, the Resident will have regularly scheduled additional opportunities to engage in interactive educational experiences with their Primary Supervisor. These experiences are evaluative and hierarchical and extend across the duration of the clinical rotation period. These experiences allow for enhancement of the Residents professional development and allows the Supervisor to monitor and provide immediate feedback on the quality of professional services offered. Additional hour(s) of supervised experience over and above that which occurs with their licensed clinical Neuropsychologist Primary Supervisor will be in the form of interactive, structured learning activities (i.e. seminars and didactics) with staff Psychologists serving on the TC, and regularly scheduled individual supervision with their Interprofessional Supervisor and Research Supervisor.

METHODS OF EVALUATION

1. The main method of evaluation is communicated by use of the Neuropsychology Postdoctoral Residency Competency Evaluation. The Primary Supervisor of each Resident will complete formal written evaluations at the mid-point and completion of each Postdoctoral Year based on

collaborative discussion with Research and Interprofessional Supervisors, to assess progress towards clinical independence and achievement of program competencies.

2. Residents will also be provided immediate written feedback on their participation in required didactic and structured learning activities (e.g. skill delivering ABPP-CN or VTEL Multisite Didactic presentation, facilitation in the Research Journal Club, performance on a Fact Finding Exercise). Performance in these activities are factored into the Neuropsychology Postdoctoral Residency Competency Evaluation form.

3. More frequent, ongoing informal evaluation will be provided on an ongoing basis during the course of their Major and Minor rotations to promote professional and clinical development and to identify and address any remediation needs.

4. Residents will evaluate the rotations and their Supervisors at the mid-point and completion of each postdoctoral year as well, providing written mid and end of year programmatic and supervisory feedback. Feedback is also regularly solicited at TC meetings and routinely integrated into the program.

COMPETENCY BASED EVALUATION SYSTEM

The competency ratings used in our program are based on the amount of supervision that is required for the Resident to perform the task competently. This rating scale is intended to reflect the developmental progression toward becoming an early career Neuropsychologist ready for an entry level position in Neuropsychology within the VHA equivalent of a GS13, or a community/academic medical center within the context of interprofessional practice who is prepared to apply for board certification in Clinical Neuropsychology.

It is our intention that evaluation of Neuropsychology Resident's progress be open, fair, and part of the developmental learning process. Residents are involved in all phases of evaluation from the initial concurrence with training goals through the final evaluation. Ongoing feedback during regularly scheduled supervisory sessions is presumed and Residents should request clarification from their Primary Supervisors and/or adjunctive Interprofessional staff if there is uncertainty about progress.

To assist in our Residency training and evaluation process, and to document the attainment of General Advanced Core, Interprofessional and Specialty (Neuropsychology) Practice competencies and outcomes, competency evaluations are conducted for the Resident's professional activities at a minimum of (4) times during the course of their training program. The competency domains expected at the completion of each Residency year are described below.

In accord with VHA Handbook 1400.04 Supervision of Associated Health Trainees and its supervision requirements related to graduated levels of responsibility for safe and effective care of veterans, we have determined that the trainee is capable of performing the following clinical activities within the context of the following assigned graduated levels of responsibility (GLR):

Room. The supervising practitioner (SP) is physically present in the same room while the trainee is engaged in health care services.

Area. The SP is in the same physical area and is immediately accessible to the trainee. SP meets and interacts with veteran as needed. Trainee and SP discuss, plan, or review evaluation or

treatment. Area supervision is available only when the trainee has formally been assigned a Graduated Level of Responsibility commensurate with this type of supervision.

Available. Services furnished by trainee under SP's guidance. SP's presence is not required during the provision of services. SP available immediately by phone or pager and able to be physically present as needed. This type of supervision is permissible only when the trainee has formally been assigned a Graduated Level of Responsibility commensurate with this type of supervision.

There are 5 possible rating levels depicting how much supervision is required for the resident to perform the professional activity or task competently. They are as follows:

1.Requires Intensive/Close Supervision

Performance expected at the Mid-to-Exit Level of the Pre-doctoral Intern: Resident exhibits Novice Core, Program Specific and/or Specialty Competencies (basic knowledge, skills, and abilities with limited experience). Residents require close supervision for unfamiliar clinical activities and/or novel circumstances. Ratings at this level represent an area of underdeveloped competency, which requires specific attention when noted. A formal remediation plan may or may not be implemented. The most commonly assigned level of responsibility (GLR) is Area; However, Room (direct observation and modeling) may be required for some routine, and many complex or new experiences. Most common rating during internship. Routine, and intensive, supervision is generally needed.

2 .Requires Routine/Occasional Supervision

Performance expected at the Entry Level of the First-Year Resident: Resident exhibits Intermediate Core, Program Specific and/or Novice to Intermediate Specialty Competencies (able to practically apply and generalize knowledge, skills, and abilities) across clinical activities and settings. Can engage in routine clinical activities with minimal structure, but may need closer supervision for more complex situations. Ratings at this level is expected of incoming doctoral staff members just starting at the GS-11 level within the VA system who have just received their doctorate and are beginning to undergo postdoctoral supervision. The most common (GLR) assigned level of responsibility is Area or Available; direct observation and modeling is infrequently required. Common rating at the end of internship through Mid-evaluation period of a 1st Year Resident. Routine supervision of most activities.

3 Requires Consultation-Based Supervision

Performance expected at the Exit Level of the First-Year Resident: Resident exhibits Advanced Core Competencies and Program Specific and Specialty Competencies. That is, consistently integrates and applies knowledge, skills, and abilities into all aspects of professional service-delivery. Able to engage in less familiar clinical activities, and function proactively and independently in most contexts. Ratings at this level is expected of unlicensed, entry level psychologists, such as those who have been working at the GS-11 level in the VA system for six months or longer. The assigned level of responsibility is Available; immediate access (Area) is only needed for very complicated cases. The Resident acts as an unlicensed "junior" colleague, requiring supervision according to compliance standards. Residents requires only consultation-based/Resident directed supervision for core health service psychology tasks with ongoing

consultation and supervision as required for advanced practice areas. This level rating is expected at the mid-point of Residency for all target competency measures.

4 Ready for Autonomous Practice

Performance at the Mid to Exit Level of the Second-Year Resident: Skills exhibited at the Mid through Exit period of Year II represent Independence of Core Competencies and Program Specific and Specialty Competencies in Clinical Neuropsychology. This is the rating expected of a Psychologist ready to apply for licensure, or newly licensed, equivalent to a GS-12 level. Supervision is required for compliance with professional standards, but the Resident is essentially ready for autonomous practice. Consultation is self-guided and directed toward life-long learning and ongoing advanced practice development. Assigned level of responsibility for this activity would be limited to Available. Residents must achieve this level rating on all targeted competency measures for successful program completion.

5 Advanced Practice, life-long learner and Consultant.

This rating reflects Advanced Mastery of Core Competencies and Program Specific and Specialty Competencies in Clinical Neuropsychology. This rating would be expected of a fully licensed, independent Psychologist at the GS-13 level within the VA system. Residents may achieve this rating on a few advanced practice tasks that represent particular strengths. This rating is for rare occasions when a Resident can serve as a consultant to other licensed psychologists in a particular area.

RESEARCH TRAINING AND DIDACTIC SEMINARS

RESEARCH TRAINING

It has been our experience that Residents value and benefit from a scientist practitioner-based training program which encourages skillful use of the empirical literature and opportunities for collaborative or self-directed research. The research requirement for the Neuropsychology Postdoctoral Resident would allow for a minimum of 10% (equivalent to 4 hours per week) of protected time. To meet the research requirement, Residents will have the opportunity to collaborate with staff and trainees from other disciplines on a program improvement/quality systems project, assist in ongoing research, and/or design and implement an independent research project under the mentoring of one staff member.

Residents be expected to provide a detailed, individualized research plan at the beginning of the first Postdoctoral year. First year Residents can anticipate spending time developing, proposing, procuring IRB approval and implementing data collection. Second Year Residents can anticipate spending time on data analysis, write up and presentation of findings at local, regional, and/or national conventions. In addition, Residents will also be expected to submit work for publication in an appropriate, peer reviewed journal. Residents are required to serve on the Neuropsychology Research Sub Committee and may attend the service level Mental Health and Behavioral Sciences Research Committee, a monthly forum in which they will be able to propose projects and provide updates on project status.

Research Requirements

The BPVHCS Neuropsychology Residents will have two options regarding their research projects over the course of their Residency. These options are designed to give the Resident some degree of

flexibility when designing their research questions and the manner in which they choose to answer these questions.

Option 1: The Resident can choose to engage in expedited or exempted research by utilizing existing databases to produce a minimum of one (1) publication worthy manuscript in each of their Residency years. This would give the Resident a minimum of 2 manuscripts that are competitive for submission in a peer reviewed journal. A Resident may opt to produce a publishable PI/QS project, Case Study or Content Article in place of 1 database manuscript. The expectation would still be submission to a peer reviewed journal.

Option 2: The Resident can choose to engage in human subject's research by designing their own project through IRB that would encompass all aspects of research design, including a full IRB proposal and subject selection/recruitment. The expectation for the Resident choosing Option 2 is that the IRB and subject recruitment portion of the project would encompass Year 1 while the data analysis/manuscript preparation would encompass Year 2. The Resident can, if they wish, produce more than one manuscript based upon their project. This would give the Resident a minimum of 1 manuscript that is competitive for submission in a peer review journal as well as experience navigating the IRB process.

Regardless of whether the Resident chooses Option 1 (pre-existing database or exempted project) or Option 2 (IRB original data collection project), the Resident is required to present their research project in a poster or symposium format at the May R&D Service Research Fair as a representative of Bay Pines Mental Health Section for a minimum of (1) of their training years.

During the course of each Year, the Resident will be evaluated on their ability to successfully design projects, navigate IRB and developing the time management, planning and organization skills required to conduct clinical research in a busy medical center. The pass/fail status of the peer review projects will be based on ability to prepare and submit product on time to their supervisor and will not be contingent on acceptance of the manuscript in a journal.

Research Supervision/Mentorship/Meetings

The Resident will meet with the Neuropsychology Supervisors at the beginning of the Residency Year I for selection/assignment of primary Research Supervisor. The Resident and the Primary Research Supervisor will work together to develop a research question within the previously listed research options. The Resident and the research Supervisor will develop a bi-weekly supervision schedule dedicated to the Resident's research project. In addition to these individual research meetings, there will be a weekly Research Update meeting on Mondays 8:00-8:30 in place of Staffing and a bi-monthly Neuropsychology Research Committee meeting for the entire Neuropsychology Team. The Resident will also have the opportunity to attend monthly MH&BSS Research Committee Meetings and develop additional Mentorship relationships with other MH Staff scientists. At a minimum, the Resident will be required to attend this meeting in order to present their project and obtain the Service Level approval (by submission and discussion of a detailed abstract) prior to submission of protocol to IRB and implementation of the research project.

SUPERVISION TRAINING

In order to promote advanced competencies in provision of Clinical Supervision, including continued development of knowledge and sensitivity to ethical, legal and multicultural issues in providing supervision, both didactic and vertical model training in clinical supervision will be integrated over the course of the 2-year training program

a. Supervision Institute (Required)

At the start of Year, I, the Residents will participate in a day long workshop to provide foundational knowledge and baseline skills assessment.

A.M. Session: Didactic Lectures by TC Staff on:

- The role of a supervisor & characteristics that make a good supervisor
- Laws, VA and APA Rules and Liability, Tiered Vertical Supervision and Supervision Contracts
- Provision of critical and positive feedback
- Boundaries – the ethics of supervisory relationships and Dealing with Conflict within supervisory relationship (remediation and grievances)

P.M. Session: Experiential Role Play Exercises with TC staff

- Targeted Vignettes, Simulated Exercises and Role Play:
- Lay the Cards on the Table Exercise

b. Supervision of Supervision/Ethics and Legal Issues in Training Seminars (Required)

Twice a month, Residents will attend the Supervision of Supervision and Ethics and Legal Issues in Training Seminar with staff members of the Training Committee. Based on the perspective that similar to training in psychotherapy, acquiring supervision competencies is a lifelong, cumulative, and developmental process. The content and goals of this seminar attends to the importance of multicultural diversity awareness, knowledge, sensitivity and advocacy within the supervisory relationship. Consideration of legal and ethical issues related to supervision are the focus of discussion once a month, as well as the influence of individual professional and personal factors, including beliefs, values, interpersonal biases and conflicts on the process of supervision.

In this seminar, which allows for structured learning activities (articles, guest speakers, PowerPoint lectures...) and discussion involving senior, mid-career, ECP and trainee supervisors, benefits include competency development and growth within a supportive, collegial environment in which issues of supervision can be candidly discussed; Development of an accessible, supportive peer group to provide consultation and support, particularly when experiencing difficulties in the supervisory relationship; reduce professional stagnation; additional opportunity to monitor and shape skills; reduce chances of ineffective or damaging supervision.

c. Vertical (Tiered) Experiential Supervision (Required)

Vertical supervision, the provision of individual clinical supervision by one Resident level trainee, to a more junior Intern or Practica level trainee under the “Umbrella” guidance and supervision of the more senior licensed provider is a valuable way to develop supervision competencies. Vertical supervision by more senior trainee increases their proficiency in providing supervision and also benefits the junior trainee through the addition of multiple perspectives and additional oversight. Residents will have ample opportunity to supervise

both outpatient and inpatient cases with the neuropsychology tracked Interns and Practica students across the course of both program years. In all cases, it is ultimately the licensed and privileged supervisor who retains clinical, ethical, and legal responsibility for all supervision and patient care provided by trainees.

INTERPROFESSIONAL DEVELOPMENT AND EDUCATIONAL SEMINARS

1. Psychology Research Journal Club (Required):

The Research Journal-Club didactic is held bi-weekly and involves an informal, weekly gathering of interns, Residents, Practica students and professional staff to critically evaluate recent peer reviewed articles in the scientific literature. The first week, Residents will be provided with instruction on how to critically review an article and how to search for and access peer reviewed journal articles through the Bay Pines VA On-line Library Services (e.g. Ebsco databases: MEDLINE, CINAHL, PSYCHINFO).

For the rest of the academic year, Interns and Residents will rotate in selecting an article of interest and providing an electronic pdf, or hard copy to participants for review prior to the next journal club meeting. The Intern/Resident will then lead the discussion that can include, but is not limited to: evaluation of research methodology/design and analysis employed by investigators, implications and limitations thereof, cultural and ethnic factors, clinical application, ecological validity and considerations for treatment with identified populations. TC Staff will rotate in joining this journal club and will provide immediate written feedback on facilitation that will be factored in to the Neuropsychology Residency Competency Evaluation.

In addition, every 4th Journal Club, the topic will focus on developing competencies in the practice/provision of Clinical Supervision. Interns and Residents will be required to present a journal article utilizing the same format as all the other Journal Clubs on a Clinical Supervision topic.

2. Multicultural Diversity (MCD) Didactic Seminar (Required):

Multicultural competence is a broad and multifaceted aspiration that requires commitment to a lifelong learning process, which can incorporate awareness of diversity issues, knowledge of cultural variation, clinical application of skills relevant to individual differences, and community advocacy and outreach. This monthly seminar is attended by Interns, Residents and Training Committee staff. It is intended to support continued development of multicultural competence by fostering an appreciation for culture and individual differences among clinicians; developing insight into clinicians' own multicultural identity and the limits of one's worldview, an understanding of multiculturalism; facilitating better care to Veterans served by addressing cultural components of difficult cases; and creating a rich learning environment for continued progress toward multicultural competency. During this seminar, self-exploration and an openness to personal growth is strongly encouraged, supported, and modeled. Each seminar is led by a triad of facilitators at each level of professional development (Intern, Resident and Career/Staff) to explore a variety of topics relevant to specific patient populations and to the promotion of multicultural competence. This may include formal didactics, or administrative discussion on exploring new initiatives/activities to promote the need of our training community. On occasion, cultural immersion experiences may be pre-arranged, intended to build awareness in areas relevant to work with VA populations, followed by group debriefing of the experience and a

discussion on how our own cultural identities, biases, and values may match or deviate from others. This seminar is coordinated by the Multicultural Diversity Sub Committee, whose mission is to promote cultural competence, self-awareness and appreciation of others viewpoints in training and health care provision, and to foster acceptance and a culture of safety across the facility at large.

3. Medical Grand Rounds (Optional):

This is an optional weekly lecture series presented by attending and visiting medical staff throughout the medical center. Participants include pharmacy, primary care, geriatrics, rheumatology, infectious disease, physical medicine, cardiology, neurology, radiology, mental health and others.

4. ABPP-CN Neuropsychology Board Certification Seminar (Required):

This is a structured, weekly seminar is delivered in an interactive, lecture and journal club format focused on development of specialty competencies in neuropsychology, specifically targeting fund of knowledge for board certification preparation. Residents and staff rotate in facilitating/teaching the seminar with topics that cover foundations for the study of brain behavior relationships and foundations for the practice of Clinical Neuropsychology. Neuropsychology staff will provide immediate written feedback on the Resident's presentation performance that will be factored in to the Neuropsychology Residency Competency Evaluation.

Examples of 2021 Fall Topics

- Assessment of premorbid estimations of intelligence
- Performance Validity Testing
- Diffuse Lewy Body Dementia
- Vascular Dementia
- Alzheimer's Disease/Mild Cognitive Impairment Frontotemporal Dementia
- Moderate to Severe TBI
- Multiple Sclerosis
- Visuocognition (Agnosia, Field Cuts, Neglect)
- Neuroanatomy of Attention
- Neuroanatomy of Language (Aphasia and Alexia/Agraphia)
- Neuroanatomy of Sensory Motor (Apraxia)
- Motor Speech & Dysarthria
- Cognitive Interventions and Neurologic Disease

5. Neurology Seminar (Required during Clerkship):

This is a weekly team based didactic shared with neurology, radiology, ophthalmology and SLP staff and postdoctoral level trainees/Residents from all five disciplines. Content includes neurology and radiology lectures, case presentations and interactive live patient evaluations. This is designed to promote interprofessional collaborative competencies including values/ethics for interprofessional practice, roles/responsibilities, and communication within a team based framework.

6. Multi-Site VTEL Neuropsychology Seminar (Required):

This is a weekly collaborative seminar that is shared with 10 VHA Medical Center Neuropsychology Residency Training sites via VTEL technology. Staff will provide immediate

written feedback on the Resident's facilitation/teaching/participation, that will be factored in to the Neuropsychology Residency Competency Evaluation. The didactic consists of two parts:

HOURL 1: Case Conference/Fact Finding Exercise:

During the Fall/Winter months, Residents will select and present on a clinical should select a case of their choice. Selected cases typically include those that illustrate an important learning point or complexity for extra feedback on. The presenter circulates a sanitized data sheet to all participating residents and staff. The presenter summarizes case, data and findings and then facilitates a more in-depth discussion. Fact-Finding Case Conference:

During the SPRING/SUMMER months, Residents will participate in ABPP-CN Fact-Finding Exercises modeled after the oral examination requirement for board certification. In this format, one boarded Training Staff member (examiner) presents basic case information to the Resident (examinee) who will gather HPI, back ground information and test data in an organized manner. The examinee then uses the information to provide a case formulation, including data interpretation, differential diagnoses, prognosis and treatment recommendations.

HOURL 2: Reading/PowerPoint Seminar:

Weekly fund of knowledge PowerPoint presentation will be conducted by Training Staff and Residents. Content will align with assigned weekly readings from traditional Neuropsychology board certification written examination preparatory materials.

Support Resources

Organizational and facility resources are available to promote improved access and delivery of patient care activities:

7. POSTDOCTORAL RESIDENCY WELLNESS & PROFESSIONAL DEVELOPMENT MID-YEAR RETREAT (Required)

Facilitated by the Whole Health Psychologist/Whole Health Coach.

The Psychology Postdoctoral Residency Wellness & Professional Development Retreat is a 4-hour experiential workshop typically occurring mid-year. The focus is on assisting trainees in relaxation, improving self-care, and engaging in values reflection. Specific tools/ exercises that will be covered include mindfulness, deep relaxation, values-exercise (i.e., PHI, strength based tools), ACT, challenges of being an Postdoc, etc... and will include opportunities to engage in yoga and tai chi. This is a collaborative retreat, attended by both the specialty neuropsychology and generalist Residents. he content and exercises will be developed in collaboration with the Whole Health facilitator.

8. POSTDOCTORAL RESIDENCY BI- WEEKLY PEER CONSULTATION (Required):

The TC recognizes that Postdocs often relocate to complete their residency from various localities, both near and far. Many move to the Tampa Bay area anticipating a (1 or 2) year-long separation from their families and primary support systems. The bonding and friendships that can develop between trainees during these pivotal training years can last a lifetime. In addition to building a strong support system early in the program due to the commonalities in circumstances, adjacent office space that fosters daily interactions and participating in structured learning activities together, the TC protects additional time for all General and Neuropsychology Postdoctoral Residents to gather informally on a bi-weekly basis for Peer Consultation. There are many benefits to holding a bi-weekly Peer Consultation group. In addition to fostering the development of a trainee support system by creating the space and honoring the time together, Peer Consultation can also improve communication between Residents and the larger, Training

Committee. The bi-weekly opportunity to come together as a group privately, allows each Resident the opportunity to discuss training needs with each other, to share resources, and support one another. It also facilitates group based feedback and information for the TC.

9.ETHICS AND LEGAL ISSUES IN TRAINING (Required):

This monthly seminar is attended by Interns, Residents and Training Committee staff. It is intended to support continued development in ethical decision making and understanding of applicable laws guiding our practice and interaction with trainees. By participating in this structured learning activity, Residents will develop increasing professional responsibility for patient care, consultation, research, supervision and teaching activities. They will demonstrate advanced knowledge of ethical, legal and cultural issues related to all of the above objectives and conduct themselves in accordance with these principles and with current professional standards. Each seminar is led by a triad of facilitators at each level of professional development (Intern, Resident and Career/Staff) to explore ethical and legal conundrums and guiding facility, state and national level laws and rules.

REQUIREMENTS FOR PROGRAM COMPLETION

Hours: The Residency requires completion of 4160 hours to be completed in no more than 24 months. This includes paid federal holidays and accumulated paid annual and sick leave that can be taken during the year.

Minimal Level of Achievement (MLAs)

MLA by the completion of the Residency YEAR I

(END of Rotation I – Neuropsychology Postdoctoral Residency Competency Evaluation Form):

By the completion of the Residency Year I, Residents are required to meet 100% of the competency element benchmarks for the Residency Level I (i.e., 100% of benchmarks should be rated as 3 or higher). None of the benchmarks should be rated as 1 or 2. Residents identified with any observed deficiencies must have a signed remediation plan in place prior to the end of Residency Year I. If the remediation plan is not successfully met within the stipulated timeframe, stated as no later than the Mid-Evaluation period of Year II, Residents risk non-continuation (fail) of the Residency program.

MLA by the completion of Residency YEAR II

(END of Rotation II Neuropsychology Postdoctoral Residency Competency Evaluation Form):

By the completion of Residency Year II, Residents are required to meet 100% of the competency element benchmarks for the Residency Level II (i.e. 100% of the benchmarks should be rated as 4 or higher). None of the benchmarks should be rated as 1, 2 or 3.

Research Project:

Residents will complete one of the following over the course the Year I and II:

Option 1: Production of 2 manuscripts/work product that are competitive for submission in a peer reviewed journal via use of existing databases, PI/QS project, Case Study or Content Article.

Option 2: Production on 1 manuscript/work product that is competitive for submission in a peer reviewed journal via designing their own human subjects research project that encompassed all aspects of research design, including a full IRB proposal and subject selection/recruitment.

ADMINISTRATIVE POLICIES AND PROCEDURES

CLINICAL AND DIDACTIC EXPERIENCE LOG:

Each Resident is asked to maintain a detailed, weekly log of Didactic Presentation titles/objectives, patient contact services involving assessments, consultations, staffing, treatment planning, supervision, research and administrative and preparatory activities. This log will be compared to generated reports documenting co-signed consultation and therapy notes in CPRS. This log serves to document exact clinical care activities and the range of experiences acquired on a particular rotation. The second purpose of this log is to provide you with “hard” copy of your experiences should you need later references for various state licensing and professional credentialing activities. Additionally, the Residents will be instructed to maintain documentation within the log of any required administrative, clinical, research or preparatory activities conducted outside of regular tour hours (e.g. preparatory readings for journal club, seminars, meetings held during the lunch hour). These data should be maintained regularly and kept indefinitely for future State Licensure documentation purposes. The contents of the log will be monitored by the Training Director to ensure you have an adequate number of cases and a diverse workload.

ABPP-CN EARLY ENTRY ELIGIBILITY

In addition, it is our expectation that you will be prepared to apply for early entry status of the ABPP-CN prior to completing your licensure. You will be expected to keep track of the names/objectives of relevant courses (seminars, didactics) and experiences to fulfill the eligibility criteria for areas of training and experiences. Once your eligibility requirements have been approved by the board, you will be provided with study materials, lectures, and practice orals to help prepare you to sit for the associated examinations.

PATIENT DOCUMENTATION and ENCOUNTER FORM REQUIREMENTS:

Documentation of patient care must conform to JCAHO, VHSRA, Medical Center and service policies, as well as licensing requirements. These most often occur as medical record “progress notes” and completion of provider requested “consults”.

Non-routine consults (STAT, ASAP, Today, etc.) will be responded to in compliance with relevant BPVAHCS timeliness policies regarding priority designation. In general, abbreviated initial “close the consult,” PM&R Secondary Notes and Group and Feedback SOAPE progress notes are to be completed on the day the patient is seen/service provided. Neuropsychological Consults are to be completed no later than 7 days after testing is complete.

Actual service provided to patient is to be noted on the medical record note in the form of a CPT billing code and number of units. All providers involved in the care must be documented with appropriate CPT codes assigned for each providers service. A diagnosis must be provided in each individual or group note. In addition, the Resident is expected to conduct and document a lethality assessment for each contact. It is also necessary to document the involvement of the Psychologist supervising your services and your status as a Psychology Resident. The staff practitioner directs the care of the patient and meaningful involvement with each case seen is essential. The staff members’ involvement needs to be reflected in (a) co-signature and (b) notes written by the Residents or (b) in an addendum written by the Supervisor. Examples of acceptable Resident statements documenting involvement of the supervisor include;

"As a pre-licensed Neuropsychology Resident, John Doe, PhD is working under the close supervision of licensed Supervising Neuropsychologist, Amy G Dala, PhD. The Veteran was educated on the purpose of the mental health service and limits to confidentiality. Prior to rendering services, the Veteran has been informed that this clinician is unlicensed and functioning under the direction and supervision of Dr. Amy G Dala. The Veteran provided oral informed consent for the mental health services. General service delivery, results and write-up have been reviewed and discussed with Dr. Amy G Dala and her co-signature indicates concurrence with the findings, diagnostic conceptualization and recommendations."

The Primary Supervisor is the responsible individual for all patient care provided by psychology Residents. When Residents change rotations or graduate, the supervisor is responsible for the care of the patients during the remainder of that episode of care. A progress note should be entered into the medical record by the supervisor stating that, "Resident X is no longer treating patient Z under my supervision." The supervisor remains responsible for the psychological care of patient "Z" until the conclusion of this episode of care or referral to another provider. It is the responsibility of the Resident to ensure a smooth transition of care and follow-up for any patients not carried over to another rotation.

There is an old VA adage that "if it's not in the chart, it doesn't exist." Timely completion of consults and documentation of care/progress are very important to the provision of coordinated, high-quality patient care. Moreover, it is ESSENTIAL to complete accurate encounter forms for all patient visits.

In general, documentation of lethality assessment and risk level, education on limits to confidentiality (including your status as a Resident) and provision of oral informed consent and discussion of limits to confidentiality for all services/ treatment should be documented in every encounter (note, consult).

NEUROPSYCHOLOGY NO SHOW DOCUMENTATION AND PROCEDURES UPDATE

- 1) If a Veteran is scheduled for an appointment in the neuropsychology clinic and does not show up within 30 minutes of their scheduled time, the HAS clerk will issue a no-show note in CPRS and add the assigned provider as a cosigner.
- 2) The provider, upon receiving the CPRS document, will review the chart to determine the Veteran's lethality risk and whether they should be rescheduled. If lethality risk is considered to be low, and the provider advises that the appointment should be rescheduled, they will place an addendum to the no-show note indicating their desired plan, and add the HAS clerk as a cosigner.
- 3) If advised to reschedule the Veteran (by the provider), the HAS clerk will attempt to contact the Veteran by phone. If they can be reached, the appointment will be rescheduled. If unable to be reached, the HAS clerk will leave a HIPAA-compliant message (if voicemail is available). If the Veteran does not return a call within one business day, the HAS clerk will attempt contact by phone two additional times. If they cannot be reached the clerk will send a letter inviting them to call to reschedule.
- 4) If no response to the phone calls or letter, or a second no-show occurs, the assigned provider will discontinue the testing consult, document recent efforts to reach the Veteran and advise the referring provider. If urgency and concern over potential lethality is heightened, the provider will address need for a health and welfare check as appropriate.

BASELINE AND EXIT MEASURES:

APA guidelines require Postdoctoral sites to have a clear and coherent curriculum plan that provides a formal, quantitative baseline and exiting measures in designated competency areas. This is measured primarily with the use of the Neuropsychology Postdoctoral Residency Evaluations. Formal evaluations in the form of immediate written feedback related to the Residents Teaching, Case Presentations, Journal Club Facilitation and Oral Fact Finding Exercises and Ethics Vignettes will occur over the course of the Residency and be incorporated into the Mid and End of Rotation Neuropsychology Postdoctoral Residency Evaluations. In addition, at the start of Year I and at the Exit of Year II, the Residents will engage in the following exercises/examinations.

Baseline and Exit Measures include:

- a. ABPP-CN Written Examination (also administered at the end of Year I)
- b. Cultural Diversity Examination (CAQ)
- c. Ethics Examination

WELLNESS AND SELF CARE

The Ability to Fully Participate in Clinical Training and Provide Supervised Clinical Care to Veterans:

VA has as statutory mission to train clinicians for VA and the nation. Clinical learning is an active process, and this requires that trainees are well. Trainee wellness is assessed prior to the initiation of training via the TQCVL form based on review of physical and other health records submitted, and then both informally and formally, as needed, during the training appointment. As trainees provide supervised clinical care like regular clinical staff, trainees need to be well throughout their training appointments.

Wellness during Training: Advanced clinical training experiences are exciting, challenging, and stressful. Despite efforts to support Residents, they may succumb to illnesses, including acute mental health conditions. Like the assessment of wellness prior to the onset of training, wellness is a key requirement throughout a clinical training appointment. When wellness issues arise, it is important to consider the safety of the Resident and patients.

Of course, all clinicians need to learn to self-monitor their health status so they can decide when to take time to rest and/or seek professional assistance. Thus, it is common to address self-care and wellness as part of training and supervision. When things work well, Residents are able to self-monitor and are open to discussing how the work is affecting them and how their wellness affects their clinical work. Often, Residency is a time in which a Resident discovers their own personal limits, and supervision can assist with this, preparing Residents to effectively manage stress as a professional. When Residents are able self-assess and learn to manage their wellness, this is ideal. When Residents deny infirmities or do not address wellness issues, these issues can be problematic.

Informal Training Supervision: Supervision typically provides the format for teaching, discussion, and processing of clinical knowledge, reactions to providing clinical care, and ancillary issues affecting patient care like wellness of the Resident provider. In achieving core competencies/skills,

it is normal for supervisors to provide guidance and feedback and facilitate the growth of the Resident.

Formal Remediation Plans: Wellness issues that impact Resident performance or conduct are not always amenable to informal supervision. Furthermore, wellness issue may be so severe that they need to be more immediately addressed. In these cases, more formal remediation plans should be developed. Clear feedback should be given, plans for improvement should be developed, achievable goals should be developed, special assistance, if required, should be offered if feasible, and a timeline for improvement should be developed.

In the case where a Resident is ill, they should be encouraged to seek and follow professional guidance leading to recovery and a restoration of functioning. Although training goals, core competencies, and required accumulation of training hours need to be achieved, generally, there is latitude on providing sick leave, annual leave, and, with permission from OAA, longer leave without pay status for longer periods of convalescence to accommodate an illness and recovery period.

Recommendations When a Resident Appears Impaired, Denies Illness, and Does not Voluntarily Seek Health Care Evaluation and Guidance: When supervisors, ancillary staff, trainee peers, or TD become concerned about the wellness of a Resident, the supervisor or TD should first address this with the Resident. On the one hand, clinical supervisors are trained to assess and treat patients. Nonetheless, as they are in a supervisor-Resident role and not a doctor-patient relationship, supervisors may not be best individuals to formally assess or manage the health of a Resident. The TD should discuss the concerns with the Resident and confirm the observations of others. If the TD questions the ability of the Resident to effectively provide patient care and/or fully benefit from the training program due to suspected health reasons, the Resident should be placed on administrative status until the Resident is cleared for duty. It is critically important to address these concerns directly, but with kindness and tact. Residents are likely to be embarrassed with these circumstances, and therefore it is critically important to make these process as non-punitive as possible.

Residents may seek external professional assessment, as approved by facility leadership and Human Resources. Alternatively, the TD may consult IGA, HR or VA Occupational Health and request a wellness assessment or formal Fitness for Duty Evaluation prior to returning to Residency training. As noted above, latitude can be granted for rest and recovery. If a health condition is identified in an assessment, the Resident has the right to request reasonable accommodation for their condition. Generally, when returning to duty after a period of absence, Residents should be cleared, at a minimum, by VA Occupational Health.

REASONABLE ACCOMODATIONS

Under federal law, employers are required to make reasonable accommodation for most health conditions, when requested by an employee/Resident. In these circumstances, the TD will consult with the Executive TC, ACOS, OAA, Education Service, HR, Legal and/or the Local Reasonable Accommodation Coordinator. Although core competencies and total training time must be achieved, there is often latitude and assistance available to support Residents in completing their training programs. Note that a reasonable accommodation is considered when requested. The rules are clear that the Resident/employee would initiate such a consideration with a request.

DUE PROCESS, REMEDIATION OF PROBLEMATIC RESIDENT PERFORMANCE, AND GRIEVANCE PROCEDURES

This section provides a definition of problematic Resident performance and how these situations are handled by the program, as well as a discussion of due process and grievance procedures.

The Residency program follows due process guidelines to assure that decisions are fair and nondiscriminatory.

Problematic Resident Performance and/or Conduct

The following describes the program's procedures for identifying, assessing, and, if necessary, remediating problematic Resident performance.

Definition of Problematic Behaviors

Problematic behaviors are broadly defined as those behaviors that disrupt the Resident's professional role and ability to perform required job duties, including the quality of: the Resident's clinical services; his or her relationships with peers, supervisors, or other staff; and his or her ability to comply with appropriate standards of professional and/or ethical behavior.

Problematic behaviors may be the result of the Resident's inability or unwillingness to a) acquire professional standards and skills that reach an acceptable level of competency, or b) to control personal issues or stress.

Behaviors reach a problematic level when they include one or more of the following characteristics:

- The Resident does not acknowledge, understand, or address the problem
- The problem is not merely a deficit in skills, which could be rectified by further instruction and training
- The Resident's behavior does not improve as a function of feedback, remediation, effort, and/or time
- The professional services provided by the Resident are negatively affected
- The problem affects more than one area of professional functioning
- The problem requires a disproportionate amount of attention from training supervisors

Some examples of problematic behaviors include:

- Engaging in dual role relationships
- Violating patient confidentiality and or privacy
- Failure to respect appropriate boundaries
- Failure to identify and report patients' high risk behaviors
- Failure to complete written work in accordance with supervisor and/or program guidelines
- Treating patients, peers, and/or supervisors in a disrespectful or unprofessional manner
- Plagiarizing the work of others or giving one's work to others to complete
- Repeated tardiness
- Unauthorized absences

NOTE: this list is not exhaustive. Problematic behaviors also include behaviors discouraged or prohibited by APA's Ethical Guidelines and VA policies and procedures.

Remediation of Problematic Performance and/or Conduct

It should be noted that every effort is made to create a climate of access and collegiality within the program. The TD is actively involved in monitoring the training program and frequently checks informally with Residents and Supervisors regarding Residents' progress and potential problems. In addition, regular Neuropsychology Training Subcommittee and General TC Supervision of Supervision meetings are held once a month to provide another forum for discovery and resolution of potential problems. Residents are encouraged to raise concerns with the TD as they arise. It is our goal to help each Resident reach his/her full potential as a developing professional. Supervisory feedback that facilitates such professional growth is essential to achieving this goal.

The Neuropsychology Training Sub Committee consists of all Neuropsychology Supervisors involved in Residency training. This subcommittee meets once per month to discuss training issues, attainment of postdoctoral competencies and programmatic development. Supervisors discuss skills and areas of strength, as well as concerns regarding clinical or professional performance and conduct. Residents also receive direct feedback from their Primary Supervisors in the form of both formal and informal evaluations that occur at regularly scheduled intervals throughout each year. All written evaluations become a part of the Resident's permanent file with the Psychology Section. These records are maintained by the TD and are kept in secure, locked cabinets.

Residents are continuously evaluated and informed about their performance with regard to achieving the training aims and competencies of the program. It is hoped that Residents and supervisors establish a working professional relationship in which constructive feedback can be given and received. During the evaluation process, the Resident and Supervisor discuss such feedback and, in most cases, reach a resolution about how to address any difficulties. Although Residents are formally evaluated at regular intervals (see previous section on the Evaluation Process), problematic behaviors may arise and need to be addressed at any given time.

If the Resident fails to meet expectations at the time of the written evaluation, or at any time a Supervisor observes serious deficiencies which have not improved through ongoing supervision, procedures to address problematic performance and/or conduct would be implemented. These include:

- 1.) Supervisor meets with TD and/or Training Committee to assess the seriousness of Resident's deficient performance, probable causes, and actions to be taken. As part of this process, any deficient evaluation(s) are reviewed.
- 2.) After a thorough review of all available information, the TD, Supervisor and/or Training Committee may adopt one or more of the following steps, as appropriate:
 - A.) No further action is warranted.
 - B.) Informal Remediation – the supervisor(s) may seek the input of the Training Committee or ACOS and decide that the problem(s) are best dealt within ongoing supervision.

C.) Formal Remediation – This is a written statement issued to the Resident which includes, but is not limited to, the following information:

- A description of the problematic behavior(s)
- Documentation that the ACOS and Training Committee is aware of and concerned about the problematic behavior(s) and that this has been discussed with the Resident
- A remediation plan to address the problem(s) within a specified time frame.

Remediation plans set clear objectives and identify procedures for meeting those objectives.

Possible remedial steps include but are not limited to:

- o Increased level of supervision, either with the same or other supervisors.
- o Additional readings or classes.
- o Changes in the format or areas of emphasis in supervision.
- o Recommendation or requirement of personal therapy, including clear objectives which the therapy should address.
- o Recommendation or requirement for further training to be undertaken.
- o Recommendation or requirement of a leave of absence (with time to be made up at no cost to the institution).
- o Requirement that an element of a rotation be repeated and or involvement with legal representatives.

The Resident is also invited to provide a written statement regarding the identified problem(s). As outlined in the remediation plan, the supervisor, TD, and Resident will meet to discuss Resident's progress at a specified reassessment date. The TD documents the outcome and gives written notification to the Resident and Supervisor(s) and ACOS. VA Office of Academic Affiliations (OAA) and the facility Education Service and Human Resources will also be notified when a formal remediation plan has been implemented and may be utilized by the program for further consultation. ***If the Neuropsychology Residency TD is in a dual role of also being the Residents Primary Supervisor, the General Postdoctoral Fellowship TD will assume the Administrative role of TD for the Formal Remediation Plan and Process to eliminate bias and promote fairness.

D.) Probation Notice – this step is implemented when problematic behavior(s) are deemed to be more serious by the TD/ACOS and Training Committee and/or when repeated efforts at remediation have not resolved the issue. The Resident will be given written statement that includes the following documentation:

- A description of any previous efforts to rectify the problem(s)
- Notification of and/or consultation as required with OAA, APPIC/APPCN, HR, Legal and other resources (e.g. VAPTC) regarding further courses of action
- Specific recommendations for resolving the problem(s)
- A specified time frame for the probation during which the problem is expected to be rectified and procedures for assessing this.

Again, as part of this process, the Resident is invited to provide a written statement regarding the identified problem(s). As outlined in the probation notice, the Supervisor(s), TD, ACOS, Resident, and a representative from OAA or Education Service or HR (optional) and Legal will meet to discuss Resident's progress at the end of the probationary period. The TD documents the outcome and gives written notification to Resident, Supervisor, ACOS, VA OAA, Education Service and the facility Chief of Human Resources.

E.) Termination – if a Resident on Probation has not improved sufficiently under the conditions specified in the Probation Notice, termination will be discussed by the TD, Training Committee and ACOS, as well as OAA, Education Service, the facility HR Chief and if required, APPIC/APPCN and Legal. In some circumstances a Resident may choose to withdraw from the program rather than being terminated. The final decision regarding the Resident's passing is made by TD and ACOS/Chief of Psychology, based on the input of the TC and other governing bodies, and all written evaluations and other documentation. If it is decided to terminate the Residency, the Resident will be informed in writing by TD that he/she will not successfully complete the Residency. The Resident, VA OAA, Education Service, APPIC/APPCN and HR will be informed of the decision in writing.

All documentation related to the formal and informal remediation process becomes part of the Resident's permanent file with the Psychology Section. These records are maintained by the TD and are kept in secure, locked cabinets.

Unethical or Illegal Behavior

Any illegal or unethical conduct by an Resident will be brought to the attention of the TD and ACOS who will document the issue in writing, and consult with the appropriate parties, depending on the situation (see description below).

Examples of significant infractions include but are not limited to:

- 1.) Violation of ethical standards for the discipline, for the training program, or for government employees.
- 2.) Violation of VA regulations or applicable Federal, state, or local laws.
- 3.) Disruptive, abusive, intimidating, or other behavior that disturbs the workplace environment or that interferes or might reasonably be expected to interfere with veteran care. Disruptive behaviors include profane or demeaning language, sexual comments or innuendo, outbursts of anger, throwing objects, serious boundary violations with staff or veterans, inappropriate health record entries, and unethical, illegal, or dishonest behavior.

Depending on the situation and the time sensitivity of the issues, the TD may consult with the ACOS, OAA, Education Service, Training Committee, APPIC/APPCN, HR and or Legal to get further information and/or guidance. Following review of the issues, the Training Committee may recommend either informal resolution steps, formal remediation procedures, formal probation or termination of the Resident from the program. Probationary status will be communicated to the Resident, VA OAA, Education Service, APPIC/APPCN and HR in writing and will specify all requisite guidelines for successful completion of the program. Any violations of the conditions outlined in the Probation Notice will result in the immediate termination of the Resident from the program.

The TD may also consult with the TC, ACOS, Human Resources, APIC/APPCN, Legal/regional counsel, other members of hospital leadership (e.g., Privacy Officer, Safety Officer, EEO Officer, Chief of Staff, Facility Director, etc.), VA OAA, Education Service in situations where there may be an ethical or criminal violation. Such infractions may be grounds for immediate dismissal. In addition, the TD may immediately put the Resident on administrative duties or on administrative leave while the situation is being investigated. Under certain circumstances, the Residency

program may be required to alert other professional organizations (e.g., APPIC/APPCN, APA, state licensing boards) regarding unethical or illegal behavior on the part of an Resident.

As described in the previous section on remediation of problematic performance and/or conduct, at any stage of the process, the Resident may request assistance and/or consultation outside of the program and utilize the resources listed above.

All documentation related to serious infractions becomes part of the Resident's permanent file with the Psychology Service. These records are maintained by the TD and kept in secure, locked cabinets in the coordinator's office.

GRIEVANCE

Although infrequent, differences in perspective may arise between an Resident and a Supervisor or another Medical staff member, which do not appear resolvable at the Supervisor/Staff-Resident level. Should this occur, the following procedures can be followed by a Resident:

- 1.) The Resident will meet individually with the Training Director within 1 week of reporting grievance to discuss grievance and explore strategies to resolve disagreement/conflict/grievance at the Resident-Supervisor/Staff Member level. Should the conflict exist between the Resident and the Training Director serving as a Primary Supervisor on a research project or within a rotation, the Resident will meet individually with the General Postdoctoral Fellowship Training Director or Assistant Chief of MH&BSS. If grievance cannot be satisfactorily resolved by all parties at this level within 10 working days...
- 2.) The Resident and Supervisor will meet with the Training Director (or Postdoctoral TD or Assistant Chief of MH&BSS if required due to Residency TD conflict) to allow assessment of the problem. If satisfactory resolution has not been reached within 10 working days....
- 3.) The Resident and Supervisor will meet with the Executive Steering Committee, made up of the Neuropsychology Residency Training Director, General Postdoctoral Training Director, Practical Training Director and Assistant Chief of MH&BSS to attempt to develop a workable solution. If satisfactory resolution has not been reached within 10 working days....
- 4.) The Supervisor and Resident will meet with a fully convened Psychology Training Committee. The committee as a whole, will then attempt to develop a workable solution. If satisfactory resolution has not been reached within 10 working days....
- 5.) The Supervisor and Resident will meet with the Assistant Chief, Mental Health & Behavioral Sciences Service (MH&BSS) who will review all pertinent data and make a final determination. If the Assistant Chief, Mental Health & Behavioral Sciences Service's decisions are unacceptable to either individual, the Assistant Chief, (MH&BSS) will outline any further options available as per local and VHA policy.

At any stage of the process, a Resident may request additional assistance and/or consultation; please see section below on grievances. Residents may also request assistance and/or consultation outside of the program. Resources for outside consultation include:

VA Office of Resolution Management (ORM)

Department of Veterans Affairs

Office of Resolution Management (08)

810 Vermont Avenue, NW, Washington, DC 20420

1-202-501-2800 or Toll Free 1-888- 737-3361

<http://www4.va.gov/orm/>

This department within the VA has responsibility for providing a variety of services and programs to prevent, resolve, and process workplace disputes in a timely and high quality manner. These services and programs include:

- Prevention: programs that insure that employees and managers understand the characteristics of a healthy work environment and have the tools to address workplace disputes.

- Early Resolution: ORM serves as a resource for the resolution of workplace disputes. ORM has been designated as the lead organization for workplace alternative dispute resolution (ADR) within VA. This form of mediation is available to all VA employees. Mediation is a process in which an impartial person, the mediator, helps people having a dispute to talk with each other and resolve their differences. The mediator does not decide who is right or wrong but rather assists the persons involved create their own unique solution to their problem. VA mediators are fellow VA employees who have voluntarily agreed to mediate workplace disputes. They are specially trained and skilled in mediation techniques and conflict resolution. In electing to use mediation, an employee does not give up any other rights.

- Equal Employment Opportunity (EEO) Complaint Processing

Association of Psychology Postdoctoral and Internship Centers (APPIC)

APPIC has established both an Informal Problem Consultation process and a Formal Complaint process in order to address issues and concerns that may arise during the Residency training year.

<http://appic.org/Problem-Consultation>

Informal Problem Consultation (IPC) Jason Williams, Psy.D. (720) 777-8108

Chair, APPIC Board of Directors

Formal Complaints Elihu Turkel, Ph.D.

Chair, APPIC Standards and Review Committee

turkel@lij.edu

APA Office of Program Consultation and Accreditation:

750 First Street, NE

Washington, DC 20002-4242

(202) 336-5979

<http://www.apa.org/ed/accreditation>

Independent legal counsel

Please note that union representation is not available to Residents as they are not union members under conditions of their VA term-appointment.

INTERPROFESSIONAL TRAINING STAFF FOR THE NEUROPSYCHOLOGY POSTDOCTORAL RESIDENCY PROGRAM

1. MENTAL HEALTH AND BEHAVIORAL SCIENCE SERVICE - NEUROPSYCHOLOGY

DAYANA CALVO, PHD

Kent State University, 2017

Neuropsychology Internship & Residency, Tampa VAMC (2016-2019)

Licensed Psychologist - Florida

Neuropsychology Clinic

Dr. Calvo's area of specialization is Clinical Neuropsychology. She completed her doctoral degree in Clinical Psychology from Kent State University in 2017 with a specialization in Neuropsychology. Following her graduate training, she went on to complete an Internship in Neuropsychology at the Tampa VA, where she stayed on board for two years of specialized Postdoctoral Residency Training in Clinical Neuropsychology. She received advanced academic training providing neurocognitive assessments to patients with a wide variety of neurological and psychological diagnoses. Her primary clinical interests include dementia, medical neuropsychology, and advanced geriatric issues. Her primary research interests revolve around health factors (i.e., diet, exercise) associated with cognition. Dr. Calvo serves as the State Representative (FL) for the Early Career Neuropsychologist Committee, APA Division 40. She is a member of the BPVAHCS Multicultural Diversity Subcommittee and provides clinical services to our Spanish-speaking veterans. **Please describe how you address diversity in the context of supervision including how your own diversity characteristics play a role in the supervisory relationship:** As a Cuban American, bilingual woman, Dr. Calvo is committed to increasing cultural awareness and knowledge in the workplace. She takes note of any diversity factors that may impact patient care and her approach to each evaluation, including selection of neuropsychological instruments, and patient factors such testing behaviors and reception to feedback. She also focuses on being open regarding her own knowledge gaps when working with diverse patients, and takes an open communication approach to foster rapport and allow for her patients to feel understood.

STEPHANIE HODGES, PSYD

Nova Southeastern University, 2009

Neuropsychology Residency Scott & White Memorial Hospital, 2009-2010

Neuropsychology Residency North Texas VA Health Care System 2010-2011

Licensed Psychologist - Florida

Neuropsychology Clinic

Dr. Hodges' area of specialization is Clinical Neuropsychology. She completed her doctoral degree in Clinical Psychology from Nova Southeastern University in 2009 with a specialization in neuropsychology. Following her graduate training, she went on to complete an Internship in Neuropsychology at the North Texas VA Health Care System, followed by two years of specialized Postdoctoral Residency Training in Clinical Neuropsychology. She received advanced academic training providing neurocognitive assessments to patients with a wide variety of neurological and psychological diagnoses. She has performed intraoperative WADA assessments and pre and post-surgical evaluations for patients with chronic pain, intractable epilepsy, tumor resection and movement disorders. She is a member of the Bay Pines VAHCS Education and Research committee. Her primary research interests include cognitive assessment of concussion and movement disorders. She also provides weekly didactics to multidisciplinary staff and trainees on a variety of topics involving neuropathology and neuroanatomy targeting specific regions and

circuitry. Currently, she serves as a primary supervisor for Interns and fellows within the Neuropsychology Consult Service. Clinical population includes Veterans with a history of known or suspected TBI, neurodegenerative disorder, NPH, CVA, MS, epilepsy, neoplasm, metabolic disorder, LD and/or ADHD. **Please describe how you address diversity in the context of supervision including how your own diversity characteristics play a role in the supervisory relationship:** As a lifelong Floridian, Dr. Hodges is committed to increasing cultural awareness and knowledge through communication, supervision and training exercises. Supervision focuses on aspects of cultural diversity through the use of authentic discussions. Supervision aims to facilitate discussions on diversity issues to increase multicultural awareness within the treatment setting but also within the supervisory relationship.

ZOE PROCTOR-WEBER, PSYD, PHD, ABPP-CN

Nova Southeastern University, 2005

Neuropsychology Postdoctoral Residency Tampa VAMC 2005-2007

Licensed Psychologist - Florida

Director of Pre-Doctoral Psychology Internship Training

Director of Neuropsychology Postdoctoral Residency Training

Neuropsychology Clinic and PM&R CIIRP/PM&R Polytrauma TBI Program

Dr. Proctor-Weber is a Board Certified Clinical Neuropsychologist. She completed her 2-year Division 40 neuropsychology fellowship at the Tampa VAMC in acute poly-trauma TBI, epilepsy and memory disorders. She has worked at USF within the Psychiatry Department assessing memory disorders and at Tampa General Hospital within the neurology and rehabilitation departments providing intraoperative Wada assessment and comprehensive pre and post-surgical NP evaluations for patients with intractable epilepsy. Primary research interests involve Cognitive Assessment, Traumatic Brain Injury and Intra-individual Variation within neurologically compromised individuals. She is PI on multiple active research projects, including a large Neuropsychology Research Database. She is the Alternate Chair of the Bay Pines IRB and serves as Treasurer/Secretary of the National VA Psychology Training Council (VAPTC). She teaches weekly didactics focused on neuropathology, neuroanatomy and neuropsychological assessment. She serves as research mentor and primary supervisor for clinical training rotations within PM&R CIIRP and PM&R Polytrauma TBI. and the general Neuropsychology Clinic. Clinical population includes Veterans with a history of known or suspected TBI, neurodegenerative disorder, NPH, CVA, MS, epilepsy, neoplasm, endocrine and metabolic disorders, and/or movement disorders. She is a Past President of the Florida Psychological Association and serves as the editor for the American Psychological Association's Division 31 Newsletter. Dr. Proctor-Weber is also the Director of Training for the pre-Doctoral Psychology Internship and Neuropsychology Postdoctoral Residency programs at Bay Pines VAHCS. She is a member of AACN, FPA and APA Division 40, 18 and 31. **Please describe how you address diversity in the context of supervision including how your own diversity characteristics play a role in the supervisory relationship:** In supervision, I join our trainees in cultivating an advanced appreciation for how culture and diversity affect the evaluation process. Selection of appropriate measurements and normative comparison groups take into consideration external factors, such as language proficiency, access to education and level of acculturation. Additionally, we attend to our own beliefs, worldview and innate biases that moderate the way in which we interpret behaviors, Awareness of, and sensitivity to the unique aspects of identity and self are critical in conducting a culturally informed examination.

CHANNING SOFKO, PhD

University of South Alabama, 2017

Neuropsychology Postdoctoral Fellowship, Warren Alpert Medical School of Brown University, 2017-2019

Licensed Psychologist – Rhode Island

Geropsychology Clinic

Dr. Sofko received her doctoral degree from the University of South Alabama's Combined-Integrated Clinical and Counseling Psychology doctoral program. She completed her pre-doctoral internship training at the Vanderbilt-Veteran's Affairs Internship Consortium. Dr. Sofko also completed a two-year post-doctoral fellowship in the Clinical Neuropsychology Specialty Program (CNSP) at the Warren Alpert Medical School of Brown University where she conducted inpatient and outpatient neuropsychological evaluations with a wide variety of neurologic (e.g., dementias, CVAs, TBI, HIV, NPH, MS, epilepsy, endocrine, and genetic) and psychiatric diagnoses. She also took part in an interdisciplinary pre-surgical DBS 'fast-track' clinic for individuals with Parkinson's disease, and she engaged in regular interdisciplinary consultation meetings with memory-disorders Neurologists. During her post-doctoral fellowship, she developed and ran a caregiver education group. At the Bay Pines VA, she works in the Geropsychology Clinic where she conducts individual psychotherapy, brief cognitive screenings, and more extensive neuropsychological evaluations for older adults. She is also involved with the Neuropsychology service. **Please describe how you address diversity in the context of supervision including how your own diversity characteristics play a role in the supervisory relationship:** It is important to intentionally address issues of diversity in supervision. Specifically, it is necessary to assess how our own worldviews impact the way we interpret data, and we must also address the limitations of our normative comparisons. In the field of Geropsychology, topics of ageism, our own views and beliefs about aging, and differences in access to education can be helpful discussions within the supervisory relationship. In psychotherapy, it is important to be mindful of how diversity characteristics may play a role in navigating the aging process. At a larger level as psychologists, it is important to be aware of power and privilege and how this can impact the therapeutic relationship.

JADA J. STEWART-WILLIS, PHD

Nova Southeastern University, 2015

Neuropsychology Postdoctoral Residency, Bay Pines VA Health Care System, 2015-2017

Licensed Psychologist - Florida

Neuropsychology Clinic

Dr. Stewart-Willis completed her doctoral degree in Clinical Psychology at Nova Southeastern University in June of 2015. Following her graduate training, she successfully completed an Internship in Neuropsychology at the Bay Pines VA Health Care System followed by two years of specialized Postdoctoral Residency Training in Clinical Neuropsychology. Dr. Stewart-Willis received advanced academic training providing neurocognitive assessments and cognitive rehabilitation treatment to patients with a wide variety of neurologic and psychiatric diagnoses. She is licensed in the state of Florida, and her current specialized clinical interests include: assessment of movement disorders, CVA & vascular-related cognitive impairment, immune mediated demyelinating diseases, and assessment and rehabilitation of traumatic brain injury. She also serves as consultant liaison to the Bay Pines VAHCS Radiation/Oncology Service. As an attending on the Neuropsychology Outpatient Consult service, she works with a diverse Veteran population, and also provides evaluation services for individuals admitted to inpatient units (e.g.,

Telemetry, Physical Medicine & Rehabilitation, and Community Living Center). Dr. Stewart-Willis coordinates the Neuropsychology Research Lab/Collective, and her primary research interests include: cognitive aging, vascular correlates of neurocognitive decline, and the clinical utility of cognitive measures used in the assessment of TBI and neurodegenerative disorders. She is an active member of professional affiliations including INS and APA Division 40. **Please describe how you address diversity in the context of supervision including how your own diversity characteristics play a role in the supervisory relationship:** Deliberately. In supervision, aspects of diversity often shape our understanding of an experience or issue, as well as provide a context for our interpersonal exchanges. Other times, we encounter aspects of diversity in ways that don't require further examination at all. In either circumstance, I encourage students toward authentic interactions with elements of diversity (their own as well as their patient's). I also attempt to model this by exploring in supervision how my own cultural background (e.g., African American, female, middle-class), informs my understanding and views of a certain topic and/or how I approach training and my clinical work. It is my belief that when we can explore cultural differences and similarities in supervision, we are better prepared to sit with, discuss, and address them when needed as they arise in practice.

2. MENTAL HEALTH AND BEHAVIORAL SCIENCE SERVICE - PSYCHIATRY

John W. D'Andrea, D.O.

Philadelphia College of Osteopathic Medicine: 1988

Residency Program: Norristown State Hospital: 1992

American Osteopathic Board Re-Certification in Neurology and Psychiatry 2007

Licensed: Pennsylvania

Dr. D'Andrea is currently assigned as the Consultation Liaison Psychiatrist in Medicine and Surgery Services. He serves as the Primary Interprofessional Supervisor for the Inpatient Consultant/Liaison Geriatric Minor. He joined Bay Pines VA HCS in 2013, Dr. D'Andrea previously served at the Wilmington and Coatesville VAMCs in Pennsylvania. He also served in various leadership roles at the Montgomery County emergency Services, including president and vice-president of the Medical Staff.

3. NEUROLOGY SERVICE

Angel Cruz, MD

Escuela De Med San Juan Bautista, 1981

Residency: Brooklyn Hospital Center; University Hospital SUNY Health Science Center; University of South FL College Of Medicine

Dr. Cruz serves as a Bay Pines VAHCS Neurologist with a specialty in Pain.

He is adjunct staff of MH&BSS within the Neuropsychology Residency and Internship programs serving as the Interprofessional Neurology Seminar Coordinator, and as an Interprofessional Supervisor for the 6 week Neurology Clerkship training experience within Neurology service.

Esther Baldinger, MD

State University of New York Downstate Medical Center College of Medicine

Internship: Albert Einstein - Montefiore Medical Center (Internal Medicine)

Residency: SUNY Health Science Center at Brooklyn (Neurology)

American Board of Psychiatry and Neurology - Certified in Neurology

Dr. Baldinger serves as a BPVAHCS Neurologist with a specialty in EEG, movement disorders, and Botox injections for the treatment of migraine. She is adjunct staff of MH&BSS within the Neuropsychology Residency and Internship programs serving as a Primary Interprofessional Supervisor for the 6 week Neurology Clerkship training experience within Neurology service.

Amanda Pennington, MD, PhD

University of South Florida College of Medicine

Internship: University of Alabama at Birmingham (Internal Medicine)

Residency: University of Alabama at Birmingham (Neurology)

Fellowship: University of South Florida College of Medicine-Clinical Neurophysiology-Epilepsy

American Board of Psychiatry and Neurology - Certified in Neurology and Clinical

Neurophysiology

Dr. Pennington serves as a BPVAHCS Neurologist with a specialty in EEG, EMG, and epilepsy. She is adjunct staff of MH&BSS within the Neuropsychology Residency and Internship programs serving as a Primary Interprofessional Supervisor for the 6 week Neurology Clerkship training experience within Neurology service.

4. PHYSICAL MEDICINE AND REHABILITATION SERVICE

Kari Pederson, MD

Chicago Medical School at Rosalind Franklin University of Medicine and Science, 1995

American Board of Physical Medicine and Rehabilitation

Dr. Kari Pederson serves at the lead Inpatient PM&R CCIRP Physiatrist for the BPVAHCS. She is board certified in Physical Medicine & Rehabilitation. She specializes in brain injuries, chronic pain, EMG/nerve conduction studies, physical injury, multiple sclerosis (MS), muscle spasticity, nerve damage, prosthetics, rehabilitation, spinal cord diseases and injuries, sports medicine, and stroke. She is adjunct staff of MH&BSS within the Neuropsychology Residency program serving as the PM&R Interprofessional Team leader. She also provides monthly didactic seminars and serves as the Primary Interprofessional Supervisor for the Inpatient PM&R CIRRP rotation.

Jessica Cupido, DO

West Virginia School of Osteopathic Medicine 2008

University of South Florida PMR Residency and Interventional Pain Medicine Fellowship 2016

Board Certified by The American Board of Physical Medicine and Rehabilitation

Board Certified in Pain Medicine by ABPMR

Dr. Jessica Cupido serves at the TBI/Polytrauma Medical Director and Staff Physiatrist for the BPVAHCS. She is board certified in Physical Medicine & Rehabilitation and Pain Medicine. She specializes in brain injuries, chronic pain, physical injury, muscle spasticity, nerve damage, rehabilitation, sports medicine, stroke and interventional pain procedures including but not limited to epidurals, nerve blocks, nerve radiofrequency ablations, ultrasound guided MSK procedures, and image guided joint injections.

ADMINISTRATIVE POLICIES AND PROCEDURES

Supervised Duty Hours:

Normal duty hours are 8:00 a.m. to 4:30 p.m. for all Neuropsychology Clinic staff. Residents may choose to work at their desks before and/or after duty hours but may not provide clinical services to patients unless an identified Supervisor is available on site for consultation. When a Supervisor is on leave, another staff member will be assigned to provide consultation. If, for some compelling reason, clinical services are required after normal duty hours, you should secure Supervisor approval and make sure that on-site Supervision is available. Overtime hours do not accrue compensatory time and are regarded as normal professional responsibilities.

All staff are required to wear their photo ID badge while on station.

Lunch periods are typically scheduled for thirty minutes between 11:00 a.m. and 1:00 p.m. On-station meals are available through the Canteen located in Bldg. 1. Due to scheduling constraints, Residents and Staff often choose to meet during the lunch period and “carry in” lunches. You are required to notify your Supervisor if you anticipate leaving station.

Neuropsychology Postdoctoral Training Years:

The Neuropsychology Postdoctoral Residency is a two-year, full-time appointment (constituting 4160 hours) to be completed during the September 2023 to September 2025 calendar years. Should illness or emergency disrupt your training schedule, approval by our Training Committee and OAA are required for any extension beyond September 2025. Stipend funding is not available for any extension.

Outside Professional Activities:

Residents will not be allowed to participate in any other outside professional activities without first receiving permission from the NP Training Sub Committee. Funded teaching, clinical or research positions on non-duty time will be considered by Training Sub Committee on a case by case basis.

Stipend:

The current annual stipend for full-time VA Postdocs is \$46,334, paid biweekly throughout the 1st year and 48,838 for year (2). This stipend is subject to Federal Income Tax withholding. Residents are classified as full-time employees, making them eligible for health insurance and life insurance benefits. Residents are not eligible for participation in the VA retirement programs. Questions concerning payment of the stipend or related topics about benefits may be directed to the Training Director.

Leave Time:

The Neuropsychology Postdoctoral Resident is a full-time, two-year appointment to begin in September of 2023. All Residents receive a full stipend – no Resident can be accepted on a Without Compensation (WOC) status. Under the federal sick leave/annual leave program, Residents will accrue 4 hours of paid sick leave and 4 hours of paid annual leave (vacation) every 2-week pay period. This equates to approximately 26 days of sick leave and 26 days of annual leave over the course of the 2-year Neuropsychology Postdoctoral Residency. In addition, there are 11 Federal Holidays per calendar year. Residents are encouraged to use leave time judiciously and require approval from the Training Director and Primary Supervisor. As with doctoral staff, leave requests must be coordinated with patient-care needs and the leave requests of other Neuropsychology Staff.

With the approval of the Primary and Interprofessional Rotation Supervisors and the Training Director, each Resident will be allocated up to 64 hours of authorized administrative leave - absence (LN -Administrative) for educational purposes (e.g. conferences, institution approved research presentations, licensure examinations, VHA job interviews etc...) as per VA Handbook 5011, Part III, Chapter 2, Section 12 which states that employees, including trainees, may be given authorized Administrative absence without charge to leave when the activity is considered to be of substantial benefit to VA in accomplishing its general mission or one of its specific functions, such as education and training. While LN leave may be approved at the service level, it is up to the discretion of HR and the Director to finalize approval. Ultimately, it is your responsibility to plan for and use your leave appropriately. The Training Sub Committee and Training Director has the right to deny LN if it is likely to have a negative effect on the course of training.

Authorized absence for travel time is limited and must be approved separately. Further, Residents are responsible for all expenses associated with off-station training activities. All anticipated leave must be requested 6 weeks in advance for consideration.

All leave requests should be entered electronically in advance and require approval by the Assistant Chief, Mental Health & Behavioral Sciences Service (MH&BSS). In addition, an informational e-mail with dates and times of the leave request, forwarded through your rotation Supervisor, should be submitted to the Director of Training. If you are unable to report to work because of illness or emergency, you must CALL the service Secretary before, but no later than one hour prior to your scheduled duty time, as well as notify your Primary Supervisor and the Director of Training. An electronic leave request for unanticipated leave must be completed on the same day as your return.

Vacation (LA) and Sick Leave (SL or CB) requests should be entered electronically in advance and require approval by the Assistant Chief, Mental Health & Behavioral Sciences Service (MH&BSS). In addition, an informational e-mail with dates and times of the leave request, forwarded through your Primary Supervisor, should be submitted to the Director of Training. If you are unable to report to work because of illness or emergency, you must call the service Secretary within one hour of your scheduled duty time, as well as notification to your Primary Supervisor and the Director of Training. An electronic leave request must be completed on your return.

EXTENDED LEAVE – FMLA

The Bay Pines Veterans Affairs Healthcare System (BPVAHCS)'s Neuropsychology Residency is committed to training that aligns with the Houston conference /APA Division 40 specialty guidelines for the training of Postdoctoral Residents in Neuropsychology as well as the American Board of Profession Psychology - Clinical Neuropsychology (ABPP-CN) requirements. With this in mind, when a Resident has to miss an extended period of time that might significantly limit their experience (less than 2 years of training) or limits the programs ability to ensure adequate training and attainment of competencies, then the TC and ACOS will convene and determine the most appropriate strategy to ensure the Neuropsychology Resident completes the necessary training requirements to ensure ABPP-CN eligibility. Residents are eligible for FMLA and all such strategies will include the involvement of VA OAA, Education Service and HR Department when appropriate.

Holidays:

There are eleven federal holidays during each Postdoctoral year. Staff and Residents typically do not work on these dates:

Labor Day	Columbus Day	Veterans Day	Thanksgiving
Christmas	New Year's	Martin Luther King Day	President's Day
Memorial Day		Independence Day	Juneteenth

Administrative Support:

Our service has administrative staff that provide assistance to the Psychology Training Programs. General supplies, fax, scanner and a copy machine are located within the various Mental Health sections for easy access. Please be aware that supplies, mailing materials and copier access are to be used only in direct support of patient care and current training activities. Use of VA letterhead and envelopes for other than official business is strictly prohibited and carries serious consequences. If in doubt, please consult your supervisor or the Director of Training. Any specific requests (e.g. materials required for Cognitive Rehabilitation, office supplies, appointment letters, etc.) should be directed to MH&BSS Training Coordinator or the Director of Training.

Basic supplies and a copy machine are located within the various Mental Health sections for easy access. Please be aware that supplies, mailing materials and copier access are to be used only in direct support of patient care and current training activities. Use of VA letterhead and envelopes for other than official business is strictly prohibited and carries serious consequences. If in doubt, please consult your Primary Supervisor or the Director of Training.

Neuropsychological Testing Center

Automated Testing: On-line administration and scoring of numerous self-report inventories and questionnaires is available to Staff Neuropsychologists and trainees via the Mental Health Package. The Mental Health Package gives Staff Neuropsychologists and trainees access to a range of individual and group psychological tests (e.g. MMPI2, PAI, MCMI etc...), allowing computerized administration to patients.

Psychometrist: Trainees have access to psychometrist services for the administration and scoring of select personality and cognitive tests.

Testing Library: Neuropsychology program hosts a comprehensive testing library that includes more than 200 common Neuropsychological test instruments (e.g. HRB, WAIS-IV, WMS-IV, WTAR, WRAT-IV, WCJ-III, DKEFs, BDAE, JLO, CVLT-II, RCFT, HVLt-R, BVMT-R etc... Neuropsychology program also offers specialty computerized testing software for trainees (e.g. WMT, Category Test, WCST, CPT-III etc...).

Dragon software: Trainees have access to Dragon software and training for dictation purposes.

SPSS software: IBM SPSS Statistics 24 is available for Residents to analyze data for their research requirements.

Intellispace software: This software is available to Residents to allow for detailed viewing of local and remote neuroimaging diagnostics.

Library Resources:

There are separate libraries for consumer health/patient education (Patient Education Resource Center) and for clinical professional needs (Medical Library). The Medical Library collection consists of over 400 journal (print) subscriptions and approximately 5,000 books and audiovisual titles. Books and audiovisuals are available for a two-week checkout period with renewal options available. Print journals are for in-house use only but there is also an extensive online journal collection with many of them being full-text available and evidence-based. In addition there is onsite access to many of the leading medical, nursing, and psychiatric databases. These include (but not limited to) PubMed, MD Consult, First Consult, CINAHL, Psychiatry Online, and UpToDate. PsychInfo, Health Business, and Cochrane.

The Medical Library has established a section containing materials on empirically supported psychological treatments. There are well-equipped computers (with Internet access and Microsoft Office products) available in the Medical Library. Internet use is restricted to educational needs and job-related activities. The Medical Librarian provides assistance with computer-based literature searches and orientation sessions to the physical and online library resources. The Library offers assistance with reference requests, library instruction, and interlibrary loans. The interlibrary loans are limited to non-charging sources from across the United States unless approved by the Chief, Library Service. After-hours access to the Medical Library is restricted to individuals have a Bay Pines identification badge.

Emergency Procedures:

The C.W. Bill Young VAMC - Bay Pines VA Healthcare System (BPVAHCS) has a number of different procedures for emergencies. During orientation and throughout the year, you will receive specific fire and safety training from BPVAHCS professionals. In addition, you will also receive procedural instructions regarding suicide threats, armed aggressors, bomb threats, and hurricane precautions.

Accidents:

There are special requirements for reporting accidents that occur on station. You must report any accident or injury that occurs to your immediate Supervisor and Director of Training. Do this even if you do not feel that medical care is necessary. It is necessary to report to Employee Health on the day of the incident. It is also necessary to file an incident report. Your primary Supervisor or TD can assist you in this.

Employee Health:

Information: The Occupational Health Service Unit at the Bay Pines VAHCS provides employees with first-aid treatment for minor illnesses to enable employees to remain at work. Antibiotics will not be prescribed. The Occupational Health Physician/designee will refer the employee to his/her private physician for all additional or definitive care.

Emergency treatment for non-job related serious illnesses may be given. If necessary, the employee may be hospitalized at Bay Pines until he/she is able to be moved to a private facility.

Employees who receive such care and who are not entitled as beneficiaries of the VA or OWCP (worker's comp) will be charged for such services.

Procedure: As outlined in VAMC Memorandum "Occupational Health" 516-05-05-11: During normal duty hours (8:00 am – 4:30 pm), Supervisors will call Occupational Health or accompany an employee to the Occupational Health Unit. For any non-medical emergency occurring outside normal duty hours, employees will be referred to or accompanied to the Emergency Room. The Administrator on Duty (AOD) will report any employee injury to the Occupational Health Unit on the next business day for appropriate follow-up. Any potentially serious employee illness/accident will be referred to the Emergency Room.

In the case of occupational illness, the employee's condition will be evaluated by the Occupational Health Physician, who will then request that the employee seek definitive treatment through a private physician. Employee must make application (Form CA-2) directly to the Workers' Comp Program Manager (05).

Employees will be billed for unauthorized treatment/diagnostic services. Employee(s) who provide(s) false/misleading information to gain free prescription/ diagnostic services will be billed and may face disciplinary/adverse action. Those employees, who are veterans and wish to receive care as veterans, must apply for Ambulatory Care Services prior to receiving medical treatment.

Only emergencies (i.e., needle punctures, cuts, acute onset of illness, traumatic job injuries, etc.) will be fully evaluated and treated anytime during the work shift. Before departing station, if you are sent off duty by the personnel physician, you will need to contact your Supervisor and the Training Director.

Hurricanes, Weather Events and Disasters:

The Office of Academic Affiliations has provided guidance related to trainees who may be impacted by significant weather events/disasters. Should an anticipated or unexpected weather event threaten our area the Bay Pines Training Program will assist trainees in the following ways to minimize the impact on training:

Coping and access to information and resources:

We recognize that Trainees are often new to our geographic region and may be disconnected from their normal social support network. The Training Director will provide trainees information on storm safety and resources (local and facility based). The Employee Assistance Program is available should a Trainee experience significant stress from an event. Cellular phones are often the first communication systems to be lost in a storm, but they are also the first system to be restored. Trainees will be provided with the cellular number of the Training Director to report their status following the storm.

Mandatory evacuations/clinic closure:

Residents may be considered for Authorized Absence coded as Weather/Safety Leave. Training Director and/or Supervisors may provide trainees with readings and other supplemental assignments to complete while on authorized absence. This may enable trainees to continue to documenting and accumulating formal training hours.

After the storm/event – challenges to safe housing/transportation:

If the facility reopens but a Trainee is unable to immediately report for duty at the facility subsequent to storm impacts, the following steps should be taken:

- The Trainee should contact their Training Director and Clinical Supervisors.
- The Trainee should use all available leave (AL and SL).
- When leave is exhausted, the trainee may request advanced leave through Human Resources, which will be earned during the remainder of their training appointment.
- When all available leave is exhausted, and/or no advanced leave is available, the Training Director may contact OAA for further guidance. In special situations, they will recommend that the trainee go on Leave Without Pay status. Discussions between the Trainee and the Training Director should occur to insure that the Trainee will have the opportunity to meet hours requirements. This may occur as an extension to the training years on a WOP status, or on a limited basis and with pre-approval, OAA may offer training appointment extensions with stipend, to allow Trainees complete required training hours for licensure requirements and/or board certification eligibility.

Liability Insurance:

While performing your duties as a Psychology Resident at the Bay Pines VAHCS, Residents are afforded full coverage under the Federal Tort Claims Act for any acts of negligence occurring during performance of their role at this medical center.

All faculty members and trainees of the sponsoring institutions, when at VA health care facilities or on VA assignment at offsite facilities and while furnishing professional services covered by this agreement, will have personal liability protection by the provisions of the Federal Employees Liability Reform and Tort Compensation Act, 28 U.S.C. 2679 (b)-(d).

The Federal Employees Liability Reform and Tort Compensation Act of 1988, Public Law 100-694 (amending 28 U.S.C. 2679(b) and 2679(d)), provides that the exclusive remedy for damage or loss of property, or personal injury or death arising from the negligent or wrongful acts or omissions of all Federal employees, acting within the scope of their employment, will be against the United States. Thus contracted Psychology Trainees from affiliated educational programs will be protected from personal liability afforded to all VA Psychology staff under those stated provisions.

Programs Statement on Non-Discrimination:

Federal law prohibits discrimination on the basis of race, color, religion, sex, national origin, age and disability. The BPVAHCS Neuropsychology Postdoctoral Residency Program extends this definition to mean that no information about the applicants irrelevant to the applicants potential to succeed in the training program is to be utilized in its selection process.

During the years of Residency training, should there be an instance of discrimination experienced or observed by trainees or staff, there is a positive obligation to address the problem so as to minimize psychological harm. Residents are encouraged to consult with their Clinical Supervisor, Research Supervisor, Interprofessional Supervisor, Assistant Chief of MH&BSS or Training Director for assistance in such matters.

Where this level of resolution is not effective or the instances are systemic, Residents as well as staff have access to formal procedures (see referenced Medical Center Policies and Procedures at the end of this Handbook). The local BPVAHCS EEO Program Manager is Tanya Weick and she is available for any assistance, consultation or to assist in any employee's exercise of their rights. <http://vawww.visn8.portal.va.gov/baypines/executive/eoo/default.aspx>

Programs Statement on Diversity

The Department of Veterans Affairs and its component agencies seek to serve the veteran population, which is their charge from the Congress and thus from the American people who elect them. The composition and diversity of the veteran population seeking healthcare from the VA reflect a multiplicity of factors that define American society. People who join the Armed Forces represent a large cross section of that society, and the veteran population who have served their country and are enrolled for health care as a benefit from their service, represent a diverse group defined by that cross section. The BPVAHCS Neuropsychology Postdoctoral Residency program seeks to have a diverse staff and trainee population along many dimensions, since the need to bring care that represents the dignity and uniqueness of all VA patients is an organizational mandate that reflects VA values.

The program operates to teach the Trainee to identify all the aspects of human diversity (i.e. individual differences) and to bring a heightened awareness of these elements of personhood into their psychological conceptualization and actions. The program staff searches for and aggressively takes opportunities to teach the importance of human diversity and individual differences in real time, as they occur continuously in clinical practice. Residents are encouraged to question and explore themselves the elements of diversity as they affect human behavior. Discussions with staff regarding the provision of psychological services in the context of human diversity are strongly encouraged, as both staff and Trainees benefit from increased awareness, understanding, and study of human diversity; it is the patient who has the greatest potential benefit.

Filing an EEO Complaint:

As a Resident, you are protected from acts of discrimination by employees and patients. If you believe you have been discriminated against because of your race, color, religion, sex (including pregnancy, sexual orientation and gender identity), national origin, age (40 years and over), physical or mental disability, genetic information, and/or retaliation, you can use the Equal Employment Opportunity (EEO) discrimination complaint process. You are also protected from filing a complaint (No Fear Act) and whistleblowing.

Employee Assistance Program:

Bay Pines recognizes its employees as one of its most valuable resources. While everyone experiences stress, sometimes the effects of too much stress can disrupt work performance and personal well-being. The EAP and WorkLife Service is designed to help you and your family members deal with problems before they become unmanageable.

Services available to employees through LifeServices EAP include, but are not limited to:

- Personal Counseling
- Family Counseling
- Financial Counseling
- Financial Information and Resources
- Legal Support and Resources

- Work-Life Solutions
- And more

Additional Information can be found by contacting LifeServices EAP directly:

- 1-800-822-4847 or visit www.lifeserviceseap.com
- To access the LifeServices EAP online orientation, please visit:
www.lifeserviceseap.com/employees-family/orientation.php

Ethical Conduct:

The Bay Pines VAHCS Neuropsychology Residency Training Program strives to produce an atmosphere of mutual respect, ethical practice and professionalism as guided by the American Psychological Association's Ethical Principles of Psychologists and Code of Conduct (APA, 2012). Please review the content of the attached 2012 revision of the Ethical Principles of Psychologists and Code of Conduct which is available online at <http://www.apa.org/ethics/code/index.aspx>

DUE PROCESS, REMEDIATION OF PROBLEMATIC RESIDENT PERFORMANCE, AND GRIEVANCE PROCEDURES

This section provides a definition of problematic Resident performance and how these situations are handled by the program, as well as a discussion of due process and grievance procedures.

The Residency program follows due process guidelines to assure that decisions are fair and nondiscriminatory. This program brochure and handbook contains written information regarding:

- Expected performance and conduct
- The evaluation process, including the format and schedule of evaluations
- Procedures for making decisions about problematic performance and/or conduct
- Remediation plans for identified problems, including time frames and consequences for failure to rectify problems
- Procedures for appealing the program's decisions or actions

At the end of orientation, Residents sign a form indicating that they have read and understood these policies.

Problematic Resident Performance and/or Conduct

This section describes the program's procedures for identifying, assessing, and, if necessary, remediating problematic Resident performance.

Definition of Problematic Behaviors

Problematic behaviors are broadly defined as those behaviors that disrupt the Resident's professional role and ability to perform required job duties, including the quality of: the Resident's clinical services; his or her relationships with peers, supervisors, or other staff; and his or her ability to comply with appropriate standards of professional and/or ethical behavior. Problematic behaviors may be the result of the Resident's inability or unwillingness to a) acquire professional standards and skills that reach an acceptable level of competency, or b) to control personal issues or stress.

Behaviors reach a problematic level when they include one or more of the following characteristics:

- The Resident does not acknowledge, understand, or address the problem
- The problem is not merely a deficit in skills, which could be rectified by further instruction and training
- The Resident's behavior does not improve as a function of feedback, remediation, effort, and/or time
- The professional services provided by the Resident are negatively affected
- The problem affects more than one area of professional functioning
- The problem requires a disproportionate amount of attention from training supervisors

Some examples of problematic behaviors include:

- Engaging in dual role relationships
- Violating patient confidentiality and or privacy
- Failure to respect appropriate boundaries
- Failure to identify and report patients' high risk behaviors
- Failure to complete written work in accordance with supervisor and/or program guidelines
- Treating patients, peers, and/or supervisors in a disrespectful or unprofessional manner
- Plagiarizing the work of others or giving one's work to others to complete
- Repeated tardiness
- Unauthorized absences

NOTE: this list is not exhaustive. Problematic behaviors also include behaviors discouraged or prohibited by APA's Ethical Guidelines and VA policies and procedures, as outlined during orientation.

Remediation of Problematic Performance and/or Conduct

It should be noted that every effort is made to create a climate of access and collegiality within the service. The TD is actively involved in monitoring the training program and frequently checks informally with Residents and Supervisors regarding Residents' progress and potential problems. In addition, Neuropsychology TC Subcommittee and General TC Supervision of Supervision meetings are held once a month to provide another forum for discovery and resolution of potential problems. Residents are encouraged to raise concerns with the TD as they arise. It is our goal to help each Resident reach his/her full potential as a developing professional. Supervisory feedback that facilitates such professional growth is essential to achieving this goal.

The Neuropsychology TC subcommittee consists of all Neuropsychology supervisors involved in Residency training. This subcommittee meets once per month to discuss training issues, attainment of postdoctoral competencies and programmatic development. In addition, the Primary Supervisors and Residents meet once per month with the General TC members and postdocs for Supervision of Supervision. This format addresses ongoing competencies of staff and Postdocs in the provision of supervision, as well as providing a regular format to address Resident performance. Supervisors discuss skills and areas of strength, as well as concerns regarding

clinical or professional performance and conduct. Residents also receive direct feedback from their Primary Supervisors in the form of both formal and informal evaluations that occur at regularly scheduled intervals throughout each year. All written evaluations become a part of the Resident's permanent file with the Psychology Section. These records are maintained by the TD and are kept in secure, locked cabinets.

Residents are continuously evaluated and informed about their performance with regard to the training goals and objectives of the program. It is hoped that Residents and supervisors establish a working professional relationship in which constructive feedback can be given and received. During the evaluation process, the Resident and supervisor discuss such feedback and, in most cases, reach a resolution about how to address any difficulties. Although Residents are formally evaluated at regular intervals (see previous section on the Evaluation Process), problematic behaviors may arise and need to be addressed at any given time.

If the Resident fails to meet expectations at the time of the written evaluation, or at any time a supervisor observes serious deficiencies which have not improved through ongoing supervision, procedures to address problematic performance and/or conduct would be implemented. These include:

1.) Supervisor meets with TD and/or Training Committee to assess the seriousness of Resident's deficient performance, probable causes, and actions to be taken. As part of this process, any deficient evaluation(s) are reviewed.

2.) After a thorough review of all available information, the TD, Supervisor and/or Training Committee may adopt one or more of the following steps, as appropriate:

- A. No further action is warranted.
- B. Informal Remediation – the supervisor(s) may seek the input of the Training Committee or ACOS and decide that the problem(s) are best dealt within ongoing supervision.
- C. Formal Remediation – This is a written statement issued to the Resident which includes the following information:
 - A description of the problematic behavior(s)
 - Documentation that the ACOS and Training Committee is aware of and concerned about the problematic behavior(s) and that this has been discussed with the Resident
 - A remediation plan to address the problem(s) within a specified time frame.

Remediation plans set clear objectives and identify procedures for meeting those objectives.

Possible remedial steps include but are not limited to:

- o Increased level of supervision, either with the same or other supervisors.
- o Additional readings or classes.
- o Changes in the format or areas of emphasis in supervision.
- o Recommendation or requirement of personal therapy, including clear objectives which the therapy should address.
- o Recommendation or requirement for further training to be undertaken.

- o Recommendation or requirement of a leave of absence (with time to be made up at no cost to the institution) .
- o Requirement that an element of a rotation be repeated.

The Resident is also invited to provide a written statement regarding the identified problem(s). As outlined in the remediation plan, the supervisor, TD, and Resident will meet to discuss Resident's progress at a specified reassessment date. The TD documents the outcome and gives written notification to the Resident and supervisor(s) and ACOS. VA Office of Academic Affiliations (OAA) and the facility Education Service and Human Resources will also be notified when a formal remediation plan has been implemented and may be utilized by the program for further consultation. ***If the Neuropsychology Residency TD is in a dual role of also being the Residents Primary Supervisor, the General Postdoctoral Fellowship TD will assume the Administrative role of TD for the Formal Remediation Plan and Process to eliminate bias and promote fairness.

D. Probation Notice – this step is implemented when problematic behavior(s) are deemed to be more serious by the TD/ACOS and Training Committee and/or when repeated efforts at remediation have not resolved the issue. The Resident will be given written statement that includes the following documentation:

- A description of any previous efforts to rectify the problem(s)
- Notification of and/or consultation as required with OAA, APPIC/APPCN, HR Legal and other resources (e.g. VAPTC) regarding further courses of action
- Specific recommendations for resolving the problem(s)
- A specified time frame for the probation during which the problem is expected to be rectified and procedures for assessing this.

Again, as part of this process, the Resident is invited to provide a written statement regarding the identified problem(s). As outlined in the probation notice, the supervisor(s), TD, ACOC and a representative from OAA or Education Service or HR (optional) and Legal will meet to discuss Resident's progress at the end of the probationary period. The TD documents the outcome and gives written notification to Resident, supervisor, ACOS, VA OAA, Education Service and the facility Chief of Human Resources.

E. Termination – if a Resident on Probation has not improved sufficiently under the conditions specified in the Probation Notice, termination will be discussed by the TD, Training Committee and ACOS, as well as VA OAA, Education Service and the facility HR Chief and if required APPIC/APPCN. In some circumstances, a Resident may choose to withdraw from the program rather than being terminated. The final decision regarding the Resident's passing is made by TD and ACOS/ Chief of Psychology, based on the input of the TC and other governing bodies, and all written evaluations and other documentation. If it is decided to terminate the Residency, the Resident will be informed in writing by TD that he/she will not successfully complete the Residency. The Resident, VA OAA, Education Service, APPIC/APPCN and HR will be informed of the decision in writing.

All documentation related to the formal and informal remediation process becomes part of the Resident's permanent file with the Psychology Section. These records are maintained by the TD and are kept in a secure, locked cabinet.

Unethical or Illegal Behavior

Any illegal or unethical conduct by an Resident must be brought to the attention of the TD or ACOS who will document the issue in writing, and consult with the appropriate parties, depending on the situation (see description below).

Infractions of a very minor nature may be resolved among the TD, the Supervisor, and the Resident, as described above.

Examples of significant infractions include but are not limited to:

1. Violation of ethical standards for the discipline, for the training program, or for government employees.
2. Violation of VA regulations or applicable Federal, state, or local laws.
3. Disruptive, abusive, intimidating, or other behavior that disturbs the workplace environment or that interferes or might reasonably be expected to interfere with veteran care. Disruptive behaviors include profane or demeaning language, sexual comments or innuendo, outbursts of anger, throwing objects, serious boundary violations with staff or veterans, inappropriate health record entries, and unethical, illegal, or dishonest behavior.

Depending on the situation and the time sensitivity of the issues, the TD may consult with the ACOS, OAA, Education Service, Training Committee, APPIC/APPCN, HR and or Legal to get further information and/or guidance. Following review of the issues, the Training Committee may recommend either formal probation or termination of the Resident from the program. Probationary status will be communicated to the Resident, VA OAA, Education Service, APPIC/APPCN and HR in writing and will specify all requisite guidelines for successful completion of the program. Any violations of the conditions outlined in the Probation Notice will result in the immediate termination of the Resident from the program.

The TD may also consult with the TC, ACOS, Human Resources, APPIC/APPCN, Legal/regional counsel, other members of hospital leadership (e.g., Privacy Officer, Safety Officer, EEO Officer, Chief of Staff, Facility Director, etc.), VA OAA, and Education Service in situations where there may be an ethical or criminal violation. Such infractions may be grounds for immediate dismissal. In addition, the TD may immediately put the Resident on administrative duties or on administrative leave while the situation is being investigated. Under certain circumstances, the Residency program may be required to alert other professional organizations (e.g., APPIC, APA, state licensing boards) regarding unethical or illegal behavior on the part of an Resident.

As described in the previous section on remediation of problematic performance and/or conduct, at any stage of the process, the Resident may request assistance and/or consultation outside of the program and utilize the resources listed above.

All documentation related to serious infractions becomes part of the Resident's permanent file with the Psychology Division. These records are maintained by the TD and kept in a secure, locked cabinet.

Regrettably, you may observe poor professional conduct, disregard for hospital procedures/policies or possibly ethical or illegal misconduct on the part of another member of the hospital staff. Should this occur, seek immediate consultation from a member of the Psychology Staff to assist you with assessment, understanding and any subsequent action that may be indicated. Be aware that the hospital has mandatory reporting procedures for patient abuse/exploitation.

GRIEVANCE

Although infrequent, differences in perspective may arise between an Resident and a Supervisor or another Medical staff member, which do not appear resolvable at the Supervisor/Staff-Resident level. Should this occur, the following procedures can be followed by a Resident:

1. The Resident will meet individually with the Training Director within 1 week of reporting grievance to discuss grievance and explore strategies to resolve disagreement/conflict/grievance at the Resident-Supervisor/Staff Member level. Should the conflict exist between the Resident and the Training Director serving as a Primary Supervisor on a research project or within a rotation, the Resident will meet individually with the General Postdoctoral Fellowship Training Director or Assistant Chief of MH&BSS. If grievance cannot be satisfactorily resolved by all parties at this level within 10 working days...
2. The Resident and Supervisor will meet with the Training Director (or Postdoctoral TD or Assistant Chief of MH&BSS if required due to Residency TD conflict) to allow assessment of the problem. If satisfactory resolution has not been reached within 10 working days....
3. The Resident and Supervisor will meet with the Executive Steering Committee, made up of the Neuropsychology Residency Training Director, General Postdoctoral Training Director, Practica Training Director and Assistant Chief of MH&BSS to attempt to develop a workable solution. If satisfactory resolution has not been reached within 10 working days....
4. The Supervisor and Resident will meet with a fully convened Psychology Training Committee. The Committee as a whole, will then attempt to develop a workable solution. If satisfactory resolution has not been reached within 10 working days....
5. The Supervisor and Resident will meet with the Assistant Chief, Mental Health & Behavioral Sciences Service (MH&BSS) who will review all pertinent data and make a final determination. If the Assistant Chief, Mental Health & Behavioral Sciences Service's decisions are unacceptable to either individual, the Assistant Chief, (MH&BSS) will outline any further options available as per local and VHA policy.

At any stage of the process, a Resident may request additional assistance and/or consultation; please see section below on grievances. Residents may also request assistance and/or consultation outside of the program. Resources for outside consultation include:

VA Office of Resolution Management (ORM) –
Department of Veterans Affairs
Office of Resolution Management (08)

810 Vermont Avenue, NW, Washington, DC 20420
1-202-501-2800 or Toll Free 1-888- 737-3361
<http://www4.va.gov/orm/>

This department within the VA has responsibility for providing a variety of services and programs to prevent, resolve, and process workplace disputes in a timely and high quality manner. These services and programs include:

- Prevention: programs that insure that employees and managers understand the characteristics of a healthy work environment and have the tools to address workplace disputes.
- Early Resolution: ORM serves as a resource for the resolution of workplace disputes. ORM has been designated as the lead organization for workplace alternative dispute resolution (ADR) within VA. This form of mediation available to all VA employees. Mediation is a process in which an impartial person, the mediator, helps people having a dispute to talk with each other and resolve their differences. The mediator does not decide who is right or wrong but rather assists the persons involved create their own unique solution to their problem. VA mediators are fellow VA employees who have voluntarily agreed to mediate workplace disputes. They are specially trained and skilled in mediation techniques and conflict resolution. In electing to use mediation, an employee does not give up any other rights.
- Equal Employment Opportunity (EEO) Complaint Processing

Association of Psychology Postdoctoral and Internship Centers (APPIC)

APPIC has established both an Informal Problem Consultation process and a Formal Complaint process in order to address issues and concerns that may arise during the Residency training year.
<http://appic.org/Problem-Consultation>

Informal Problem Consultation (IPC) Jason Williams, Psy.D. (720) 777-8108

Chair, APPIC Board of Directors
Formal Complaints Elihu Turkel, Ph.D.
Chair, APPIC Standards and Review Committee
turkel@lij.edu

APA Office of Program Consultation and Accreditation:

750 First Street, NE
Washington, DC 20002-4242
(202) 336-5979
<http://www.apa.org/ed/accreditation>

Independent legal counsel

Please note that union representation is not available to Residents as they are not union members under conditions of their VA term-appointment.

PREVIOUS RESIDENTS

Applications are encouraged from all geographical areas. To date, our Residents have been graduates of Nova Southeastern University, University of South Florida, University of Hartford;

Georgia school of Professional Psychology/Argosy-Atlanta; Palo Alto University and Pepperdine University.

Such diversity in training, theoretical perspectives, cultural experiences, and interests enhances our program and ensures both challenging and valuable professional growth for our Residents.

GRADUATES OF BAY PINES NEUROPSYCHOLOGY POSTDOCTORAL RESIDENCY

Of particular interest to applicants is the successful transition of our graduating Residents to professional positions. Former Residents are now employed in a variety of Academic, VHA and Rehabilitation Medical Centers across the country.

POSTDOCTORAL ADMISSIONS FOR 2015-2021

Postdoctoral Residency Admissions, Support, and Initial Placement Data

Postdoctoral Program Admissions – Table Updated 8/16/21

Briefly describe in narrative form important information to assist potential applicants in assessing their likely fit with your program. This description must be consistent with the program's policies on resident selection and practicum and academic preparation requirements:

The primary aim of the program is to prepare early career Neuropsychologists for entry level positions in Neuropsychology within the VHA equivalent of a GS13, or a community/academic medical center within the context of interprofessional practice who will ultimately be prepared to apply for board certification in Clinical Neuropsychology. The 2-year program is designed to promote clinical specialization in the field of Neuropsychology through advanced training that is consistent with the American Psychological Association, Division 40 Houston Conference Guidelines and the American Board of Professional Psychology (ABPP). We review applicants to our program using the following criteria: supervised clinical experience in Neuropsychology and intervention, research experience, letters of recommendation, motivation/professional development, commitment to and/or experience/interest in diversity, and interview/match with our program. Ideally, we are looking for individuals committed to the scientist-practitioner model and who are committed to pursuing board certification in Clinical Neuropsychology.

Financial and Other Benefit Support for Upcoming Training Year

Annual Stipend/Salary for Full-Time Residents	\$46,334 (1 st year) \$48,838 (2 nd year)
Annual Stipend/Salary for Part-Time Residents	N/A
Program provides access to medical insurance for resident?	Yes
Trainee contribution to cost required?	Yes
Coverage of family member(s) available?	Yes
Coverage of legally married partner available?	Yes
Coverage of domestic partner available?	No

Hours of Annual Paid Personal Time Off (PTO and/or Vacation): PTO/Vacation leave accrues at the rate of 4 hours every two weeks, amounting to 13 vacation days per year

Hours of Annual Sick Leave: Sick leave accrues at the rate of 4 hours every two weeks, amounting to 13 sick days per year

In the event of medical conditions and/or family needs that require extended leave, does the program allow reasonable unpaid leave to residents in excess of personal time off and sick leave?

Yes

Other benefits: All Federal Holidays off; up to 8 days authorized absence for approved professional activities (e.g., conferences, workshops, etc.); eligible for health and life insurance

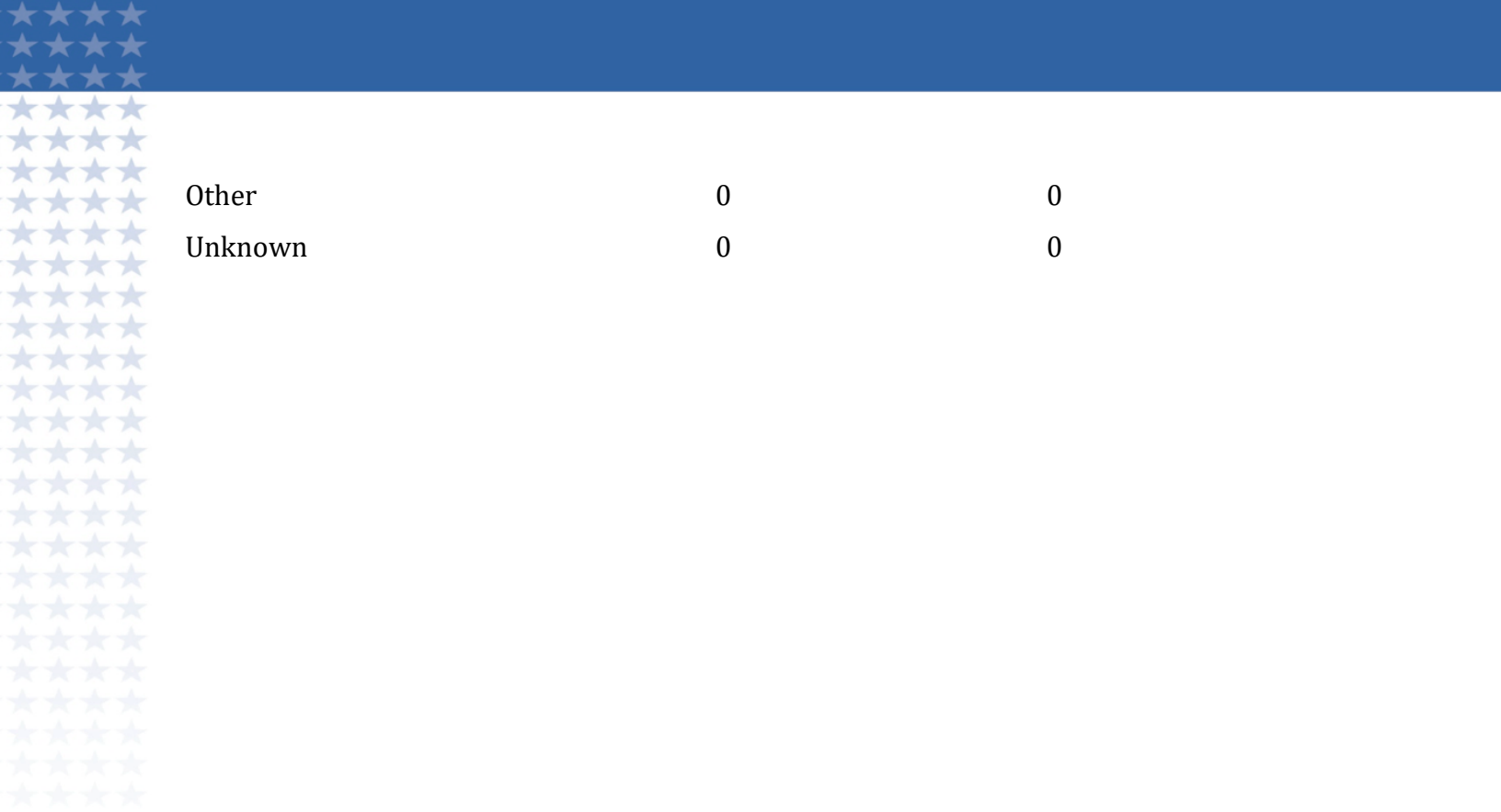
Initial Post-Residency Positions

Aggregated Tally for the Preceding 3 Cohorts (2015-17 to 2019-21)

Total # Residents who were in the last 3 cohorts 6

Total # Residents who are training in the program currently 2

Total # From Last 3 Cohorts:	<u>PD Residency</u>	<u>Employed Position</u>
Community mental health center	0	0
Federally qualified health center	0	0
Independent primary care facility/clinic	0	0
University counseling center	0	0
Veterans Affairs medical center	2	3
Military health center	0	0
Academic health center	0	0
Other medical center or hospital	0	2
Psychiatric hospital	0	0
Academic university/department	0	0
Community college/teaching setting	0	0
Independent research institution	0	0
Correctional facility	0	0
School district/system	0	0
Independent practice setting	0	0
Not currently employed	0	1
Changed to another field	0	0



TRAINING ENVIRONMENT



Living Environment:

The Bay Pines VA Health Care System is in Bay Pines, Florida, close to the major cities of St. Petersburg and Tampa in what is called, the Tampa Bay area. The 2010 Census states Tampa is third largest city in the Southeastern United States, behind Miami and Atlanta. The "Greater Tampa Bay" area has just over 4 million residents and generally includes the Tampa and Sarasota metro areas. St. Petersburg, which is located roughly 15 minutes from Tampa on the opposite side of the Bay, is the fourth largest city in the state of Florida, which is home to roughly 4 million residents. Census 2006 data revealed the median income for a household for the Tampa Bay area is \$39,602. English as a first language accounted for 77.43% of all residents, while Spanish accounted for 17.76%. The Tampa Bay area provides and array of cultural opportunities including numerous festivals, LGBTQ events, music venues, advocacy groups and involvement in Political and faith communities.

Weather

With a purported average of some 360 days of sunshine each year, Tampa is nicknamed "The Sunshine City." For that reason, the city and surrounding area of St. Pete is a popular tourist, and retirement destination, especially for those in the United States from colder Northern climates – particularly New York City, Detroit, and Chicago. The Tampa Bay Area has a humid subtropical climate with a definite rainy season from June through September and the area is occasionally visited by tropical storms and hurricanes. The last time a hurricane directly struck the area was in 1921. Many portions of the area, especially along the bay and in south St. Petersburg have tropical microclimates. Royal palms and coconut palms, as well as other tropicals, grow to maturity and fruit. Average temperatures range from 54 to 90, with the warmest months during the summer.

Schools

Tampa hosts several well-known colleges and university, including the University of South Florida, Tampa University, Florida Metropolitan and Stetson school of law among others. St. Petersburg has a branch of the state university, as well as St. Petersburg College and Eckerd College. The Poynter Institute, a school for journalists, future journalists and teachers of journalism, is also located in St. Petersburg.

Beaches and Parks

The Tampa Bay area is home to more than a dozen Florida State Parks and Historic Sites including Caladesi Island State Park, recently named America's top beach destination by Dr. Beach and known to beachcombers as a shell-seeker's paradise; Hillsborough River State Park in Hillsborough County, where the river tumbles over outcroppings of Suwannee limestone, creating a series of rapids; and Myakka River State Park in Sarasota County, one of the state's largest parks, which hikers can venture through pine flatwoods, over marsh and swamp and across a dry prairie.

St Pete area hosts numerous parks and the Pinellas Trail a 34-mile-long trail where one can safely enjoy bicycle riding, strolling or jogging. The Pinellas Trail is truly one of Florida's premier urban trails. Stretching from Tarpon Springs to St. Petersburg, the trail links some of Pinellas County's most picturesque parks, scenic coastal areas and residential neighborhoods. Boyd Hill Nature Park located on Lake Maggiore is a 245-acre (0.99 km²) preserve where you can see many of the endangered plants and rare wildlife of Tampa bay. There is a bird exhibit which houses bald eagles, owls, hawks, and other species. St. Petersburg is well regarded for its beaches. In 2005, Fort Desoto was rated the number one beach in America by the annual Dr. Beach rankings. Trip Advisor also has the beach ranked number one in the nation for 2008. Recently, St. Petersburg has become known and regarded as one of America's most livable cities.

Travel

Tampa International Airport provides air transportation for most passengers. Smaller airlines, with destinations to smaller cities and towns, operate at St. Petersburg-Clearwater International Airport, with most tenants providing only seasonal services. Orlando and Sarasota offer major airports as well and are within 1 ½ hours driving time from the Tampa Bay area.

Amtrak services Tampa via the Tampa Union Train Station, located in a historic building near the port between downtown and Ybor City. The Silver Star reverses its direction at Tampa Union Station on its way between Miami and New York.

The Port of Tampa is located downtown and hosts several cruise lines.

Mass Transit

The Hillsborough Area Regional Transit Authority (HART) operates streetcars as well as the bus system in Tampa. HART has a signed transit deal with the University of South Florida, allowing students to ride for free on most bus routes.[89] In addition, students from several other colleges and universities can purchases passes at half price from their school. The TECO Line Streetcar System, which links Ybor City, the Channel District and Downtown Tampa. Mass transit in St. Pete is provided by the Pinellas Suncoast Transit Authority (PSTA). There is also a sightseeing trolley, called The Looper that travels to key downtown destinations daily.

TAMPA BAY REGION ART AND CULTURAL COMMUNITY EVENTS

Florida's temperate climate and population diversity makes it a natural venue for many fun, and educational outdoor events and community cultural events, especially those that celebrate the state's sizable Hispanic and Caribbean populations. Moving to the Tampa Bay region won't disappoint! You can experience and celebrate Florida's unique cultural makeup and contributions – through music, film, presentations, parades, festivals and more. Here are a few of our monthly and seasonal opportunities!

JANUARY EVENTS

Tampa Bay Black Heritage Festival

This ten-day African-American festival ushers in the Martin Luther King Holiday Weekend in Tampa Bay, a vibrant region that embodies diversity. It highlights the contributions of African Americans in the U.S. and how they've impacted the country. It includes live entertainment, cultural events, health tutorials, business seminars, renowned speakers, food and craft vendors, plus a music fest featuring national recording artists.

Where: Tampa

Web: tampablackheritage.org

Tocobaga Indian Mound in Philippe Park - On the shores of Old Tampa Bay, Safety Harbor Mound resides behind shelter #2 at Philippe Park, where you can climb to the top of the ancient structure. Nearby Safety Harbor Museum of Regional History, located on the site of a Tocobaga Indian mound, displays artifacts that were found in it, dating back to the Safety Harbor culture, 1500 to 1700 A.D.

Where: Safety Harbor, year round

Weedon Island Preserve Cultural and Natural History Center - "Weeden Island culture," dated from A.D. 200 to 900, was first identified at Weedon Island Preserve, leaving sherds of pottery and other proof of existence in shell mounds excavated by the Smithsonian Institution in the 1920s.

Where: St Petersburg, year round

"CHRISTMAS SPECTACULAR!" HOLIDAY HOME TOUR - Elaborate, elegant, over-the-top designer Christmas decorations in one of Florida's most historic mansions. The 1886 "Gilded Age" Victorian Stetson Mansion has been recently been listed as one of the "Top 10 Things to do in Florida" by Tripadvisor. Reservations required.

Where: Stetson Mansion, 1031 Camphor Ln, DeLand, FL 32720

Web: stetsonmansion.com/

GASPARILLA PIRATE FEST – Visitors from all over the country swoop in to celebrate as bead-wielding pirates invade the City of Tampa, beginning with a boat parade and brunch, a parade along Bayshore Boulevard and a street festival that draws thousands.

Where: Multiple locations in Tampa

Web: gasparillaextravaganza.com

COLOR IN MOTION 5K – Begin at the starting line in white clothing and finish covered in splashes of vibrant pink, green, yellow, blue and orange. Join others in this moving rainbow of fitness to stay on top of your New Year's resolution goals.

Where: Artegon Marketplace, Orlando

Web: colorinmotion5k.com/Orlando

MANATEE COUNTY FAIR – This 11-day fun-fest recently turned 100 and features first class stage shows, national concert acts, midway rides, livestock shows, auctions, competitions, tons of kids activities and of course, lots of corn dogs and cotton candy and other tasty fair food.

Where: Manatee County Fairgrounds, Palmetto

Web: manateecountyfair.com

FELLSMERE FROG LEG FESTIVAL – Hop on over to this annual event with 80,000 other folks.

Highlights include: yummy frog's leg and gator tail dinners, frog jumping contests, hot legs contests, carnival rides, Red Neck Olympics (including Pig's Feet Bobbin') great live music and more than 100 booths featuring the work of unique craftsmen and artisans.

Where: Fellsmere

Web: froglegfestival.com

MLK DAY NATIONAL PARADE – Thousands line the streets of St. Petersburg to cheer on booming marching bands, flamboyant dancing teams, colorful floats, waving politicians and other VIPs during what's considered the oldest and largest MLK Day parade in the southeastern U.S.

Where: Downtown St. Petersburg

Web: spmlkparade.com

FLORIDA MANATEE FESTIVAL – Celebrate Florida's beloved gentle giant with arts and crafts, live music, a beer garden and live manatee viewing at the nearby Three Sisters Spring. The event is a favorite among locals as it grows and adds attractions each year.

Where: Downtown Crystal River

Web: gomanateefest.com

THE DRAGON FESTIVAL – Part Renaissance Fest and part Highland Games, this event honors a mythical dragon with two days of music, storytelling, jousting, jugglers, tomato-throwing, horse shoe games, ladder climb competitions, fortune telling, sword, archery displays and other shenanigans.

Where: Wickham Pavilion, Melbourne

Web: thedragonfestival.com

ZORA NEALE HURSTON FESTIVAL OF THE ARTS & HUMANITIES – Set in the birthplace of Harlem Renaissance writer and cultural icon Zora Neale Hurston, fans celebrate her legacy and birthday through readings, music and other programs.

Where: Eatonville

Web: zorafestival.org

PIGS IN Z'HILLS BBQ & BLUES FEST – BBQ connoisseurs, competitors, musicians, car buffs and history and aviation enthusiasts return to feast on award-winning dishes while they enjoy live blues, kids' activities, aircraft and military history displays, classic cars, a business expo and more.

Where: Zephyrhills Municipal Airport, Zephyrhills

Web: facebook.com/PigzBBQBlues

TAMPA BAY BLACK HERITAGE FESTIVAL – Celebrate African-American history and culture with 10 days of music, dancing, cultural events, business seminars, food, health tutorials, and uplifting

speakers. The event's two-day music fest features national performers and is surrounded by "villages" showcasing artists, authors and children's activities.

Where: Multiple locations in Tampa

Web: tampablackheritage.org

DESOTO COUNTY FAIR – Florida's heartland puts on the ultimate county fair, complete with judged exhibits for beef, swine, rabbits, poultry and goats. The longtime fair – nearly 60 years running – also has carnival rides, cotton candy and corn dogs, arts and crafts booths and a pageant to crown the Fair Queen and Miss DeSoto County.

Where: Arcadia

Web: desotocountyfair.org

SUNSHINE MUSIC FESTIVAL – Chill out in St. Petersburg's breezy waterfront park and listen to folksy rock tunes by nationally-known artists. Refresh at the wine bar, craft beer tent and food trucks.

Where: Vinoy Park, St. Petersburg

Web: sunshinemusicfestival.com

IMAGES: A FESTIVAL OF THE ARTS – As one of the top outdoor art shows in the southeastern United States, IMAGES draws artist from all over the world to participate in its juried show. The park is filled with group and solo musicians, hands-on activities for kids and a food court.

Where: Riverside Park, New Smyrna Beach

Web: imagesartfestival.org/

TARPON SPRINGS EPIPHANY – Every Jan. 6, Tarpon Springs' Greek community rallies around a chilly body of water and watch boys dive for the golden cross, thrown in by a Greek Orthodox Archbishop. The cross is said to bring good luck all year to he who retrieves it, and it's a tradition that has drawn onlookers and media coverage for decades.

Where: Spring Bayou, Tarpon Springs

Web: visitstpeteclearwater.com/tarpon-springs-epiphany

CENTRAL FLORIDA SCOTTISH HIGHLAND GAMES – Fans of Scottish heritage and culture, or simply just those who love to watch a good competition, will love this jam-packed schedule of Highland dancing, bagpipes, archery, shortbread tasting, face painting and other Scot-centric fun.

Where: Central Winds Park, Winter Springs

Web: flascot.com

SEMINOLE SUNCOAST WOOD CARVERS SHOW – Woodcarvers of all skill levels and interests display and sell their pieces of work, which range from realistic-looking mounted game trophies to intricately engraved keepsake boxes to custom-made walking canes. Hobbyists can learn more at seminars and workshops.

Where: Seminole

Web: suncoastwoodcarvers.com

VOLUSIA BEER WEEK – Get to know some of Central Florida's finest and most unique craft beers by kicking off Volusia Beer Week on a bus tour. The bus will pick up in downtown DeLand and

make six stops throughout the county to taste at various breweries. The week will continue with a lineup of events to help enlighten those with curious palates.

Where: Volusia County

FEBRUARY EVENTS

GRAPEFRUIT LEAGUE – Florida’s glorious winter and spring weather is best enjoyed while watching a spring training game (February through April) as 15 major league baseball teams get ready for the upcoming season.

Where: Multiple locations in central and South Florida, including Kissimmee, Tampa, Sarasota, Jupiter and Port St. Lucie

Web: floridagrapefruitleague.com

RAPTORFEST – Learn everything you ever wanted to know about Florida’s sly and skilled birds of prey at this fascinating fair, which includes live animal encounters, tree climbing, tram tours, kids’ activities, art exhibits and a silent auction.

Where: Boyd Hill Nature Preserve, St. Petersburg

Web: raptorfest.org

FLORIDA STATE FAIR – Nearly a half a million people are drawn to the thrill rides, indulgent food and headline bands at the long-running Florida State Fair, which still awards prizes to prized livestock, best pies and most impressive quilts. Try the pizza cone or bacon ice cream. (But not before stepping on the Tilt-a-Whirl.)

Where: Florida State Fairgrounds, Tampa

Web: floridastatefair.com

CELTIC FAMILY JAMBOREE – Bring the kids, dogs, RV and your own food and drinks to this sleepover campsite festival, a two-day party packed with Celtic folk bands, Highland games and workshops teaching everything from fiddle to Irish dance to yoga.

Where: Sertoma Youth Ranch, Brooksville

Web: celticheritageproductions.com

PASCO COUNTY FAIR – Get a glimpse of Florida country living at the Pasco County Fair’s pig races and bull and heifer show, along with days of quirky entertainment such as a sea lion show, a hypnosis and comedy act, alligator displays, pageants and lots of spinning rides and sugary treats.

Where: Dade City

Web: pascocountyfair.com

CLEARWATER BEACH UNCORKED – Nationally acclaimed chefs wow guests with a pre-Valentine’s smorgasbord of appetizers, entrée samplings, desserts, fine wine and microbrew beer. This is one of Clearwater Beach’s biggest food and drink events of the year, drawing guests from all over the world.

Where: Clearwater Beach

Web: clearwaterbeachuncorked.com

PINE CASTLE PIONEER DAYS – Local historians honor a piece of Central Florida history – The Pine Castle neighborhood between Orlando and Kissimmee – with a recreation of the area’s turn-of-

the-century events. Actors play out old dueling scenes and give history lessons, folk bands play, horse carriages give tours and vendors sell handcrafted wares.

Where: Cypress Grove Park, Orlando

Web: pinecastlepioneerdays.org

BEER, BOURBON & BBQ FESTIVAL – This tasty festival makes serves up pulled pork, brisket, sausages and sides, as well as all-you-care-to-drink beer and bourbon samples. Also: a giant Jenga, trike races and cornhole competitions.

Where: Curtis Hixon Waterfront Park, Tampa

Web: beerandbourbon.com

ZEPHYRHILLS AUTO EVENTS SWAP MEET – Car lovers, collectors and families enjoy three days of classic cars on display, food and fun while gearing up for the popular auction featuring more than 300 antique, luxury, exotic, muscle and classic cars, as well as motorcycles and specialty trucks.

Where: Zephyrhills Festival Park, Zephyrhills

Web: zephyrhillsautoevents.com

LOCALTOPIA – Small and independent businesses showcase everything from smoothies to spa services and dog treats to mom and pop cafes. Artists and musicians entertain with exhibits and live music.

Where: Williams Park, downtown St. Petersburg

Web: keepsaintpetersburglocal.org/localtopia

LEESBURG MARDI GRAS – Leesburg paints the town purple and gold, capping off a week of mixers and events with a king and queen-crowning ball and family-friendly street festival. Three parades fill the streets with the finale, featuring stilt walkers, fire eaters, jugglers, costumed pets and, of course, lots and lots of beads.

Where: Downtown Leesburg

Web: leesburgmardigras.com

BAY AREA RENAISSANCE FESTIVAL – A museum lot is transformed into a 16th Century village, complete with live armored jousting, dancing, juggling, archery, human chess matches, artisans and minstrels, as well as marketplace vendor booths and old-time grub and refreshments.

Where: Museum of Science and Industry (MOSI), Tampa

Web: bayarearenfest.com

ENTERPRISE CHILI COOK-OFF – A quaint historic town holds its annual chili cook-off, offering several types of chili to hungry guests, with proceeds benefitting the town's non-profit preservationist group.

Where: Enterprise Heritage Center, Enterprise

Web: oldenterprise.org

HARDEE COUNTY FAIR – Attracting families and participants from all over the rural heartland of Florida, this fair features old fashioned livestock shows, pageants, arts and crafts competitions and rides. Check out the energetic livestock auction and Mexican rodeo.

Where: Hardee County Fairgrounds, Wauchula

Web: hardeecountyfair.org

SEAFOOD AND MUSIC FESTIVAL – Seafood “experts” serve up a delicious spread of crab legs, shrimp, tuna, oysters, crawfish, calamari, lobster mac and cheese, fish and chips, smoked mullet spread and more. There’s also top notch live music.

Where: Port Canaveral

Web: visitportcanaveral.com

DAYTONA 500 – Regarded as one of NASCAR’s most prestigious races, this event draws families and adrenaline junkies from all over the world. The popular Sprint FANZONE an exclusive peek into NASCAR garages, driver appearances and autograph sessions, entertainment, kids’ bounce houses and historic car displays.

Where: Daytona

Web: daytonaInternationalspeedway.com

MARCH EVENTS

RANCH JAM – Bring your whole camper or simply some folding chairs and a picnic blanket for this three-day festival of country, rock and blues bands. Plenty of beer and food vendors will be on hand to serve the masses, as well as bounce houses and face painters for the kids.

Where: Myakka City

Web: ranchjam.net

SPRING OBSESSION – Get garden-inspired by the array of Florida native plants, orchids, roses, herbs, gingers, fruits, exotics and other interesting greenery while dropping in on presentations, listening to live music and shopping for unique outdoor artwork and patio furniture.

Where: Munn Park, Lakeland

Web: springobsession.org

SUNLIT FESTIVAL – This nine-day festival devoted to entirely to literary culture is spread among several events at various venues – a Jack Kerouac night at one of the beat writer’s favorite dive bars, a huge antique book fair, an evening with local poets, a pub-and-coffee-shop crawl devoted to different eras of writing, and more.

Where: St. Petersburg

Web: sunlitfestival.org

UPTOWN ART EXPO – More than 150 of the country’s best painters, sculptors, photographers, glassworkers, potters, and crafters bring their best stuff to this juried art show, mingling with some new guests this year – chalk artists. Kids will love the street performances, sweet treats and lemonade stands.

Where: Cranes Roost Park, Altamonte Springs

Web: uptownartexpo.com

WEEKI WACHI SWAMP FEST– Experience Florida swamp culture through fried alligator, black-eyed peas, folk dancers and singers and a “swamp monster contest” – kids and adults dressed in elaborate costumes depicting moss-covered, slime-drenched creatures of the swamp.

Where: Weeki Wachi Springs State Park

Web: swampfestweekiwachee.com

FIRESTONE GRAND PRIX OF ST. PETERSBURG – This thrilling open-wheel series race twists and turns along a waterfront backdrop, nestled right in downtown St. Petersburg. Even those who don't have track-side tickets can enjoy the surrounding events such as a beer garden, driver autograph sessions, games, music and refreshments.

Where: St. Petersburg

Web: gpstpete.com

SPRING FAIR – Port Orange welcomes the warming weather with carnival rides, ponies, a BMX stunt show, a skate competition, bands, laser tag and a pet costume contest and parade. Arrive early and hit the business and craft expo booths or stay late and watch a movie under the stars.

Where: Port Orange

Web: familydays.com/spring-fair

THE WORLD'S LARGEST FOOD TRUCK FESTIVAL EVER – "World's largest" is a heady claim but the Guinness record books don't lie. Tampa continues its tradition of drawing hundreds of food trucks to one location for a weekend, giving guests tasty options from Philly cheesesteaks to fried ice cream.

Where: Tampa

ST. PETE BEACH BEER FEST – Use your own commemorative tasting cup to sample more than 50 types of beer from all over Florida and other parts of the country while enjoying the beautiful beach setting. Keep your belly full with tacos, BBQ and other festival foods, and finish it all off with a cigar, hand-rolled right in front of you.

Where: St. Pete Beach

Web: visitstpeteclearwater.com/beer-fest

BIKE WEEK – A Daytona Beach tradition for nearly 80 years, it's the world's most famous 10-day party for motorcycle enthusiasts and spring breakers, attracting bikers of all shapes, sizes, nationalities and eccentricities. Roam the streets and find vintage cycle shows, rock music concerts, biker breakfasts and planned rides.

Where: Daytona Beach

Web: officialbikeweek.com

GASPARILLA MUSIC FESTIVAL – An all-star alternative and indie lineup is sure to bring tens of thousands of young and hip concertgoers to blend with fans of other genres like blues, gospel, bluegrass, country and folk.

Where: Downtown Tampa

Web: gasparillamusicfestival.com

WILL MCLEAN MUSIC FESTIVAL – This homage to the "Florida Father of Folk" brings families, campers, musicians and local historians to Hernando County, where they enjoy banjo and fiddle workshops, music by original songwriters, poetry, storytelling, Florida Cracker-style food, contests and crafts.

Where: Sertoma Youth Ranch, Brooksville

Web: willmclean.com

NATIONAL CUBAN SANDWICH FESTIVAL – Miami and Tampa have been battling over who has the best and most authentic Cuban sandwich for decades. This festival aims to settle the debate – at least until the next year – with its annual three-day competition spotlighting sandwich makers from both regions, working their magic with pork, Swiss cheese and whatever other secret ingredients the competitors slip between slices of fresh-baked Cuban bread.

Where: Historic Ybor City, Tampa

Web: thecubansandwichfestival.com

LAKERIDGE WINERY AND VINEYARDS WINE AND SEAFOOD FEST – As a perfect way to kick off Florida's beautiful spring weather, Lakeridge Winery hosts its signature event featuring its own cuvee blanc, chardonnay, ports and other types of wine, as well as beer, soft drinks and a variety of seafood specialties. Complimentary tastings and tours are included.

Where: Clermont

Web: lakeridgewinery.com

THE PREGO EXPO – Expectant parents, new parents and future parents (and grandparents) finally get their own expo event with educational seminars, safety tips, new product samples and more. New moms can visit a play area with their little ones and moms-to-be can get free 3D and 4D sonograms of their growing bumps.

Where: Orlando

Web: thepregoexpo.com

FLORIDA STRAWBERRY FESTIVAL – The Strawberry Capital of the World goes all out to honor its most prized fruit, serving it on shortcake, in milkshakes, by the container or by the flat. Plus, check out carnival rides, livestock shows, the fried candy bar truck and performances by nationally known headline artists.

Where: Plant City

Web: flstrawberryfestival.com

EPCOT INTERNATIONAL FLOWER & GARDEN FESTIVAL – For its special annual spring event, Epcot transforms into a maze of stunning flower and plant topiaries, outdoor kitchens with International food samples, home design presentations, a hippie-themed concert series and more. March through mid-May.

Where: Lake Buena Vista

Web: disneyworld.international-flower-and-garden-festival

APRIL EVENTS

The Tampa Bay Blues Festival

Every year since 1995, Vinoy Park, snuggled against the shores of Tampa Bay, has hosted some of the biggest names in Blues, including Buddy Guy, George Thorogood, and Jerry Lee Lewis. Touted as one of the world's finest blues music events, this festival boasts three days of music, a kick-off party and after parties, as well as food, beer, wine, mixed drinks, vendors, and arts and crafts.

Where: St. Petersburg

Web: tampabaybluesfest.com

FUNK FEST – Combining old school and new school rhythm and blues, the long-running Funk Fest brings its tour through Orlando. Top national acts always appear at this this all-evening outdoor show that also has plenty of food and merchandise vendors.

Where: Central Florida Fairgrounds, Orlando

Web: funkfesttour.com

FLORIDA STORYTELLING FESTIVAL – Florida Story Association celebrates all things story in Mt. Dora. Highlights: Evening concerts under the Big Top Tent, workshops, Story Swaps, Story Slams, Fringe Stories and Front Porch Stories at the historic Lakeside Inn. There's even a Story Cruise on Lake Dora. Tellers have been bringing their best stories from all over the world for more than 30 years.

Where: Lakeside Inn in Mt. Dora

Web: flstory.com/

SUN 'N FUN INTERNATIONAL FLY-IN & EXPO – This weeklong celebration of aviation is packed with activities for the young and old, the cutting edge and nostalgic, the adrenaline junkies and the picnic packers. Watch fighter jets soar and hot air balloons float after visiting entertaining and educational programs and expos.

Where: Lakeland

Web: www.sun-n-fun.org

TAMPA BAY BLUES FEST – One of Florida's most popular blues music events returns for the 20th year, set against the beautiful waterfront backdrop of Vinoy Park. This fest always attracts the America's top blues performers. Refreshments are plentiful, with seafood, barbeque, Cuban cuisine, beer, wine, and mixed drinks on the menu.

Where: Vinoy Park, St. Petersburg

Web: tampabaybluesfest.com

FIESTA IN THE PARK – Experience the beauty of springtime weather in the most scenic area of downtown Orlando, where patrons can gaze at oil paintings, portraits, metal sculptures, Indian arts and crafts and other wares for sale while enjoying live music and feeding the geese in the Lake Eola. Pets welcome!

Where: Lake Eola, downtown Orlando

Web: fiestainthepark.com

INDIAN RIVER FESTIVAL – This colorful and quaint festival is family-focused, with lots of interesting and fun activities for all ages including kite flying, kayaking, arts and crafts tents, food, music, an obstacle course and more.

Where: Sandpoint Park, Titusville

Web: nbbs.com/festivals

FLORIDA BLUEBERRY FESTIVAL – Playing second fiddle to the strawberry, the Florida blueberry is often the state's forgotten treat. But not at this annual festival, which features blueberry desserts, blueberry wines, blueberry vinegars and jams, as well as a beer garden, dog show, car show and a Blueberry Kids Zone.

Where: Brooksville

Web: floridablueberryfestival.org

FESTIVAL OF CHOCOLATE – This touring celebration spreads cocoa love among the chocoholic attendees with traditional and creative desserts, candies and drinks. Small businesses show off their handmade products, pastry chefs and chocolatiers work their artistry and magic and chocolate advocacy groups (yes, these exist) educate guests on all that is wonderful about chocolate.

Where: Tampa

Web: festivalofchocolate.com

PIER 60 SUGAR SAND FESTIVAL – This beach-wide celebration pays tribute to Tampa Bay's two most valuable assets: sugar sands and sunsets. The showcase is a 21,000-square-foot structure that transforms into an art gallery of sand sculptures created by master sculptors from around the world.

Where: Pier 60, Clearwater Beach

Web: sugarsandfestival.com

BOOMTOWN DAYS – The small town of Dunnellon pays homage to its roots -- the discovery here of phosphate in the 1800s. Don't miss the Lil' Miss and Mr. Dunellon Pageant, which is the highlight event among other entertainment, crafts vendors and delicious BBQ and fair food tents.

Where: Historic Dunnellon

Web: ocalamarion.com

EASTER SURF FESTIVAL – This unusual combination of Easter and surfboards has something for everyone, particularly if you love Florida's east coast waves. Along with various levels of surfing and skim board competitions, there's an Easter egg hunt and a special sunrise service on the beach.

Where: Lori Wilson Park, Cocoa Beach

Web: eastersurffest.com

LEESBURG BIKEFEST – Unleash your wild side at this loud and raucous three-day event devoted to motorcycles, music and gentle mayhem. Also included: Live music, a tattoo expo, a classic bike show, bikini contests and more.

Where: Leesburg

Web: leesburgbikefest.com

SIESTA FIESTA – Siesta Key Village blocks off its streets for a weekend to create the perfect springtime art show only blocks from the Gulf of Mexico and its delightful breeze. Admire or buy paintings, glass art, metalwork, jewelry, sculptures and photography, or check out the live bands and nearby shops.

Where: Siesta Village, Siesta Key

Web: escape-to-sarasota.com

FESTA ITALIANA – It kicks off with a wine party featuring more than 70 wines, as well as Italian antipasti, cuisine and desserts. It ends with the main event, during which dozens of the Tampa Bay area's top restaurants and catering companies serve delicious dishes and tastings.

Where: Historic Ybor City, Tampa

Web: festaitalianatampa.com

CENTRAL FLORIDA EARTH DAY– Learn about Florida’s endangered species, sample some vegan foods, do some Tahitian dance moves, buy some plants and paint a “paper bag mushroom” at Central Florida’s longest-running Earth Day celebration.

Where: Lake Eola Park, Orlando

Web: cfearthday.org

MAY EVENTS

CLEARWATER BEACH RESTAURANT WEEK – It’s actually two weeks long and gives you the chance to sample some of the area’s top-notch dining or casual fare, all at super low prices. It all begins with a kick-off party that features beer and wine tastings, music and fireworks.

Where: Various restaurants in Clearwater Beach

Web: clearwaterbeachrestaurantweek.com

FOOD AND WINE ON PINE – Top chefs and culinary students from around the region prepare their best dishes, from lobster and shrimp ceviche to gourmet tater tots to frozen wine slushies, as guests watch chalk demonstrations and sip Kentucky Derby drink specials along Anna Maria’s Pine Avenue.

Where: Along Pine Avenue in Anna Maria

FISHSTOCK – Thousands of fishing enthusiasts flock to the fish-filled waters of New Smyrna to show off their skills in various events, including the Redfish-Trout Challenge and the Striker Offshore Tournament. Children can learn to fish in the Kidstock seminars, and there’s a boat show and a 5k for those on the sidelines.

Where: New Smyrna Beach

Web: fishstock.com

BIG GUAVA MUSIC FESTIVAL – Some of the most popular names in alternative, rock, indie and hip-hop are always on hand to make this one of Florida’s best music festivals of the year.

Where: Florida State Fairgrounds, Tampa

Web: bigguavafest.com

SCOTT’S ZELLWOOD SWEET CORN JAMBOREE – Long & Scott Farms is a one-of-a-kind, authentic farm and market, complete with a seven-acre maze and country store. Spend a day listening to music, taking your kids to the on-site playground, checking out various crafts vendors, and of course, trying the delicious Florida sweet corn.

Where: Mt. Dora

ORANGE BLOSSOM JAMBOREE – Dozens of Florida bands, ranging from funk to country to hard rock, jam in this four-day event held on a sprawling campsite. Spend a day or roll up in your RV and spend the whole long weekend listening to original and cover tunes and eating BBQ, vegan dishes and other concessions.

Where: Sertoma Ranch, Brooksville

Web: orangeblossomjamboree.com

NEW SMYRNA BEACH BLUES FESTIVAL – Relax and get into the summer spirit at this annual and much-anticipated blues fest, which draws music fans from all over Florida to the streets of New Smyrna, where talented musicians entertain at various bars and stages throughout the town.

Where: New Smyrna Beach

Web: nsbfla.com/bluesfest

ORLANDO INTERNATIONAL FRINGE THEATER FESTIVAL – This 14-day arts festival offers theatre, music, dance performances and artists of all genres. Kids Fringe for children and families features entertaining performances by Fringe artists, workshops, hands-on art activities.

Where: Orlando

Web: orlandofringe.org

SUNSCREEN FILM FESTIVAL – About 90 full-length films and shorts, including narratives, documentaries, foreign films, Spanish-language films, and animated works are featured. Attend workshops to help hone your own filmmaking skills.

Where: St. Petersburg

Web: sunscreenfilmfestival.com

ST. JOHNS RIVER FESTIVAL OF THE ARTS – More than 125 regionally and nationally accredited fine artists and craftsmen line the charming brick streets of downtown Sanford, bringing paintings, pottery, sculpture, woodworking, photography, jewelry, blown glass and more. Enjoy hand crafted food at the Culinary Arts Court and see live artist demonstrations.

Where: Historic Downtown Sanford

Web: stjohnsriverartfest.com

CENTRAL FLORIDA'S BBQ BLOWOUT – One of the state's biggest BBQ events of the year, the Blowout brings 80 professional and backyard teams grilling and smoking their hearts out to compete for cash, trophies and a chance to go on to the World Food Championships in Vegas.

Where: Oveido

Web: bbqblowout.org

TROPICAL HEATWAVE – Eclectic local bands share stages with national acts in this long-running Tampa Bay area music event hosted by community radio.

Where: Ybor City, Tampa

Web: tropicalheatwave.org

FOOD AND WINE ON PINE – Try delicious dishes from local restaurants, pair them with fine wines and craft beer, and dance along to the live rock, blues and jazz bands.

Where: Pine Avenue, Anna Maria

Web: foodandwindonpine.com

COUNTRY 500 – Top country music acts rock Daytona on Memorial Day weekend as racing's greatest venue turns into a festival-goer's dream for three days and nights. Check out the artist meet-and-greets located throughout pit road and the garages.

Where: Daytona International Speedway, Daytona Beach

Web: country500.com

JUNE EVENTS

ST. PETE PRIDE

This humongous festival draws around 100,000 marchers to the parade in downtown St. Petersburg's Historic Grand Central District, as well as hundreds of thousands of visitors enjoying the area's clubs and beaches. As an added bonus this year, the parade has been moved to nighttime rather than its usual mid-day launch, giving attendees a relief from the heat and giving visitors more time to relax at BBQs, tailgates and parties during the day.

Where: St Petersburg

TAMPA BAY CARIBBEAN CARNIVAL

Steeped in tradition, this colorful event showcases the vibrant Caribbean-American cultures. It includes a J'ouvert morning experience (J'ouvert means day break or morning, and marks the start of the Carnival) as well as exhibits, crafts, top-name entertainment, vendors, a street parade, a Steelpan Jamboree, carnival music, and high-stepping masquerade bands.

Where: St Petersburg

Web: carnivaltampa.com

ST. ARMANDS CIRCLE AND DOWNTOWN VENICE CRAFT FESTIVALS: Peruse booths filled with painting, crafts, stained glass, pottery, jewelry, photography, personalized products for kids and pooches and much more, including a Green Market for plants, handmade soaps, tangy BBQ sauces and gorgeous orchids.

Where: St. Armands Circle on St. Armands Key just off the coast of Sarasota; Miami Avenue in Venice

Web: artfestival.com

SUMMERLAND CONCERT TOUR: If the 1990s was your decade, this one's for you. This annual event features the best acts that were popular in that decade.

Where: Top Rocker Field, Fort Myers

Web: SixBends.com

SARASOTA SUP CHAMPIONSHIPS – Paddleboard enthusiasts, competitors and newbies hit one of the world's best beaches to watch various elite, juniors, sprint and distance events on the water. Demos for kids and adults help even the paddle-weary learn to enjoy this accessible and popular sport.

Where: Siesta Key Beach

Web: sarasotasupchampionships.com/

SARASOTA MUSIC FESTIVAL – Hundreds of music students from some of the top programs in the world attend this three-week festival to showcase their talent and learn new skills. Festival audiences are invited to any of the concerts or lectures, including the Thursday afternoon Artist Showcase concerts, Friday Festival chamber concerts, and Saturday Symphony orchestra concerts.

Where: Sarasota

Web: sarasotaorchestra.org/festival

MAIN STREET BLAST – For those who can't wait until July 4 to get the party started, New Port Richey's KIAFEST Main Street Blast early Independence Day celebration includes all the holiday highlights: fair food, a Miss Firecracker contest, live music and, of course, fireworks.

Where: Downtown New Port Richey

Web: nprmainstreet.com

TAMPA BAY CARIBBEAN CARNIVAL– Festive music, loud colors and fiery foods take over St. Petersburg's Albert Whitted Park while a colorful street parade honors the Caribbean culture. Great live music, too.

Where: St. Petersburg

Web: carnivaltampa.com

ONE MAGICAL WEEKEND – One of the world's biggest LGBT weekend events returns to the Walt Disney World resorts, bringing an exciting lineup of pool parties, film viewings, Epcot drink-around-the-world shenanigans and other fun times.

Where: Lake Buena Vista

Web: onemagicalweekend.com

ST. PETE PRIDE – One of the southeast United States' largest LGBT pride celebrations features artists, musicians, fashion designers, community leaders, business owners and activists. The grand finale is the evening night parade and family- and pet-friendly street festival on the last weekend of Pride.

Where: St. Petersburg

Web: stpetepride.com

SILVER SPURS RODEO – More than 70 years old, this classic Central Florida rodeo is still going strong, drawing the best bull riders, barrel racers and ropers to the Silver Spurs Arena. The event kicks off with the glitzy Miss Silver Spurs pageant and has various kids' activities and interesting vendors to visit during rodeo breaks.

Where: Osceola Heritage Park, Kissimmee

Web: silverspursrodeo.com

POLKA DOT FLEA – As cute as it sounds, the annual Polka Dot Flea is filled with cool vintage items and wares, more like a Paris street market than a junkyard of overstock items. Treasure hunters delight in one-of-a-kind finds for their home and garden, as well as unique items of clothing, funky antique jewelry, repurposed bikes, furniture and more.

Where: Central Florida Fairgrounds, Orlando

Web: polkadotflea.com

REPTICON – This long-running annual features tub-loads of slithery, cold-blooded creatures for petting, handling, photographing, purchasing or watching in one of the many educational lecture events devoted to snakes, geckos, iguanas, toads, turtles and more.

Where: Florida State Fairgrounds, Tampa

Web: repticon.com

THE BEER PROJECT – St. Petersburg's Museum of Fine Arts teams up with the homegrown Green Bench Brewing to present this well-meshed combo of arts and craft beer. Cast your vote in a homebrewed beer competition and taste local breweries' special beers inspired by selected works in the Museum's collection.

Where: St. Petersburg

Web: fine-arts.org/beer-project

JULY EVENTS

SARASOTA IMPROV FESTIVAL – Comedy troupes from all over the country – and some from overseas – bring three days of laughs and performances, including all-female acts, musicals, audience interactive plays and other entertaining displays of off-the-cuff talent. Participants can also buy tickets to workshops and seminars.

Where: Florida Studio Theatre, Sarasota

Web: floridastudiotheatre.org

THUNDER ON THE RIDGE – This annual event sets Polk County a-glow with the area's largest July 4th fireworks display, including a Guinness World Record number of sparklers lit at once. General admission is free and includes live music, children's activities, games, arts & crafts vendors, a beer garden and food concessions.

Where: Haines City

Web: visitcentralflorida.org

SHARKCON – Shark! Ease your fears of these saw-toothed beasts by learning more about their fascinating history, psychology, physiology, habits and pop culture significance at the returning SharkCon, a weekend of education and interactive fun honoring the ocean. See displays featuring touch tanks, paddleboard lessons and even mermaids.

Where: Florida State Fairgrounds, Tampa

Web: shark-con.com

FIREWORKS AT THE FOUNTAIN – The Orlando Concert Band entertains the July 4th crowd with patriotic favorites while families enjoy a kids' activity area with basketball, tennis and more. Grab some BBQ and drinks before settling near the lake to watch a dazzling nighttime fireworks display.

Where: Lake Eola Park, Orlando

Web: cityoforlando.net/fireworks

COOL ART SHOW – This popular, free indoor (read: air-conditioned!) art show fills the St. Petersburg Coliseum with ceramics, jewelry, photography, paintings, sculpture and multimedia works. Food and drinks, including beer and wine, are also on the menu.

Where: St. Petersburg

Web: pava-artists.org

MAJOR BEACH SOCCER – More than 100 teams and thousands of spectators flood the white sands of Clearwater Beach to take part in this serious beach soccer competition series. It's a fun break from the usual beach sports of volleyball and Frisbee and one of five qualifying tournaments leading up to the December national championships.

Where: Clearwater Beach

Web: majorbeachsoccer.com/clearwater-beach

A SCI-FI FOURTH OF JULY – Dress up as your favorite sci-fi movie character and hit the streets of Celebration for this quirky, upbeat Independence Day party. Live music provided by colorful bands, artists and artists will lead up to a spectacular fireworks display set to a sci-fi soundtrack.

Where: Downtown Celebration

Web: celebrationtowncenter.com

TASTE OF THE BEACHES – Sample seafood, desserts, hot sauces, jams, ice cream, ethnic cuisine and more from local favorite restaurants and caterers serving the beach foodie scene. Buy a \$25 drink wristband and taste unlimited beer and wine, too.

Where: Madeira Beach

VANS WARPED TOUR – Music fans from all over the state flood the waterfront Vinoy Park to see some of the world's most popular alternative rock bands. Cool off at the misting station and slip n' slide if you don't mind getting wet.

Where: Vinoy Park, St. Petersburg

Web: vanswarpedtour.com

DUNEDIN ORANGE FESTIVAL – In a town known for its history of oranges, orange groves and citrus packing, this festival became a natural fit in 2010 and has been held every July in Edgewater Park since. Sample some contest entries in the local restaurant Mojo cook-Off Contest, or try some fruity ice cream, smoothies and juice blends.

Where: Dunedin

AUGUST EVENTS

GAY DAYS

What began in 1991 as an unofficial weekend where LGBT visitors show up at Disney World and wear red has blossomed into one of the world's most popular and well-known weekends for gay and lesbian tourist. "We were voted the number one global destination in 2013, which we're excited about," said Chris Alexander-Manley, President of Gay Days, Inc. "It helps that we're in one of the top tourist destinations in the world." The weekend's appeal spans all ages and applies to all of Orlando's theme parks.

Where: Orlando

SARASOTA SLAM – Fishing amateurs beware! This is a fiercely competitive tournament for skilled inshore and offshore anglers yielding impressive results snapper, trout and other tough catches to weigh in and compete for money prizes. There's a category for Jr. Anglers and a dockside BBQ and party for competitors and guests.

Where: Marina Jack, Sarasota

Web: sarasotaslam.com

NIGHT IN THE TROPICS – Feel like you're in Key West without driving hours south by hitting the heart of downtown New Port Richey and partying with the parrot-heads. The all-night-long street party includes Latin-style food and music, tropical and exotic birds, dancing, street performers, a classic car cruise-in and a tropical beer garden.

Where: Historic downtown New Port Richey

HARVEST GRAPE STOMP – Fun for kids and even more fun for adults over 21, Lakeridge Winery's annual grape stomp is a great late-summer event that invites families to feel the squish of grape skins between their toes while being serenaded by local musicians and tasting a variety of wine and beer. Soft drinks are also on-hand for the kiddos, as well as food for purchase.

Where: Lakeridge Winery & Vineyards, Clermont

Web: lakeridgewinery.com

SUMMER OF RUM FEST – What better way to stay cool in the Florida summer heat than with a sampling of various rum punches, rum runners, rum coladas, rum mojitos and more rum. Patrons have the option of partying outdoors for a true tropical experience or cooling off indoors, with music and dancing throughout.

Where: The Cuban Club, Ybor City (Tampa)

Web: summerofrumfest.com

ORLANDO GIFT SHOW – Get your holiday shopping done early at this popular expo and trade show where home-shopping fanatics, collectors and other curious buyers can sift through a wide selection of vendors selling decorative accessories, aromatherapy, greeting cards, paper goods, tabletop, resort and tourist merchandise, logo products, fashion accessories, toys, games, gourmet products, jewelry and even gift cards for those who can't decide.

Where: Orange County Convention Center, Orlando

Web: orlandogiftshow.com

INDIAFEST OF MANASOTA – The Gujarati Association of Manasota and the Indian American Association team up to raise awareness and appreciation of the culture, traditional dance, food, handmade merchandise and historical presentations highlighting Indian life and the spirit of India.

Where: Bradenton Area Convention Center, Palmetto

Web: manasotaindiafest.com

FLORIDA KIDS & FAMILY EXPO – All types of family-focused exhibitors – from playground-makers to Girl Scouts to petting farms – gather to display their goods and provide interactive fun for kids of all ages and their parents. Teens can learn makeup techniques, kids can play laser tag and parents can learn more about party planning, daycare and other innovative offerings. Bonus: It's all indoors and air-conditioned.

Where: Orange County Convention Center, Orlando

Web: mycentralfloridafamily.com

GULFPORT GECKO CRAWL – The little town of Gulfport signifies the end of summer and kicks off its signature GeckoFest with its annual Gecko Crawl, a six-bar pub crawl and street festival that ends at the local favorite, O'Maddy's.

Where: Historic Waterfront District, Gulfport

Web: geckofest.com

TAMPA BAY COMIC CON – Geek out at one of the Tampa Bay area's most well-known and long-running "cons," filled with everything you'd expect at weekend devoted to comic book junkies: cosplay, celebrity guests, toys and graphic novels, an electronic gaming arena and a "game cave" with tabletop and board games, foam sword fighting, a kids play zone and more.

Where: Tampa Convention Center, Downtown Tampa

Web: tampabaycomiccon.com

WAZOO – Named one of the "10 Great Beer Festivals in the Country" by USA Today, this annual tasting event features 275 beers and beverages from around the world, tasty food samplings from favorite Tampa Bay area restaurants and live music throughout the Zoo.

Where: ZooTampa at Lowry Park

SEPTEMBER EVENTS

COME OUT WITH PRIDE

An entertaining and exciting event for both LGBT and non-LGBT visitors alike, Come Out With Pride – also known as Orlando Pride – takes over downtown and other areas for a week. With big-name sponsors such as Macy's and Universal Studios, the parade and its colorful costumes and elaborate floats is something to behold, and the fireworks show is one of the best you'll see outside of July 4th.

Where: Orlando

TOM JOYNER FAMILY REUNION

This Expo is huge, free, and family-friendly – what's not to like? Its concerts, games, star-studded performances, seminars, fitness, celebrity appearances and autograph signings are sure to keep your whole gang smiling.

Where: Orlando

Web: blackamericaweb.com/category/tom-joyner-family-reunion

SHINE MURAL FESTIVAL – More than a dozen local and national mural artists put their work on display on downtown building walls and inside galleries throughout St. Petersburg's funky, growing arts district. Watch art students take part in a community mural project outside of a bar along Central Avenue or take one of the trolley or walking tours.

Where: Downtown St. Petersburg

Web: shineonstpete.com

TAMPA THEATRE WINEFEST – At a beloved and historic old theater holds its biggest fundraiser, patrons are encouraged to come dressed as their favorite character based on the yearly theme. Also: sample fare from some of the area's best independent restaurants and rare, top-rated wines from around the world.

Where: Tampa Theatre, downtown Tampa

Web: tampatheatre.org/WineFest

HOWL-O-SCREAM FREAKY PREVIEW – Dare to be among the first guests – or victims – at Busch Gardens' annual haunted freak show opening weekend. Expect lots of terrifying surprises and pop-ups as you encounter roaming creatures, scare zones and interactive entertainment, as well as navigating some of Florida's top thrill rides in the dark.

Where: Busch Gardens, Tampa

Web: seaworldparks.com

PIONEER DAYS – The long-running, two-week celebration wraps up with the Annual Pioneer Days Parade on Labor Day morning. But before that, enjoy a weekend packed with family-friendly activities such as cardboard boat races, a photo contest, a car show, a fish-a-thon, a chalk art festival, "Englewood's Got Talent" and more.

Where: Englewood

Web: englewoodpioneerdays.com

FESTIVAL OF FLIGHT – Take a ride on a helicopter, float through the air on a hot-air balloon, co-pilot a plane or just sit back and watch the beauty of colorful flying objects, including deltas, trikes and kites. This festival brings together the pilot and aviation community with Florida families.

Where: Wesley Chapel

Web: festivalofflightwesleychapel.com

TASTE OF THE FIELDS – Just as the early fall temperatures begin to drop, enjoy an evening of “country elegant” outdoor dining with a multi-course plated meal, served family-style, made from food grown on Hernando County soil. Then relax and enjoy live music, wine tasting, a corn maze and other fun grown-up activities.

Where: Lakeside Ranch, Brooksville

Web: kiwanisofthebrooksvilleridge.com

GECKOFEST – A month of gecko-themed fundraiser events finishes with the well-attended, daylong Geckofest, which takes over the waterfront streets of quirky Gulfport with residents and visitors dressed up as the reptiles. The day consists of a walking parade, a costume contest, street performers, food vendors, two musical stages and arts and crafts tents.

Where: Downtown Gulfport

Web: geckofest.com

ART IN ODD PLACES ORLANDO – This inaugural event is exactly what it sounds like: the discovery of unusual and fun works of art in places you would never expect to find them. Check out performances and installation pieces from more than 60 artists along the entire stretch of Orlando’s 14th Street, from FDR Drive to the High Line.

Where: Downtown Orlando

Web: artinoddplaces.org/orlando

FLAVOR RUN 5K – Engage all the senses while getting a good workout at this unusual and hilarious 5K run/walk/stroll event, similar to a “color run” except tastier. Entrants make their way toward the finish line while being doused with brightly colored powder that tastes like blueberry, strawberry, orange, banana, watermelon and grape.

Where: Florida State Fairgrounds, Tampa

Web: flavorrun.com/tampa

ST. PETE OKTOBERFEST – Celebrate Oktoberfest St. Pete-style with an afternoon and evening of costume, yodeling and stein-holding contests, knockwurst and homemade kraut, specially brewed beers, kid-friendly activities and a lineup of some of the area’s favorite bands and solo artists.

Where: Grand Central District, St. Petersburg

Web: stpeteoktoberfest.com

ROCK THE UNIVERSE – Florida’s largest Christian music festival returns to Universal Studios, where some of the country’s best Christian rock and worship music bands and inspirational speakers entertain a large turnout of enthusiastic fans. Guests can also join in a moving Candle Lighting Ceremony and a special Sunday Morning Worship Service.

Where: Universal Studios, Orlando

Web: universalorlando.com/Rock-The-Universe

I LIKE IT HOT! FESTIVAL – If you like it hot – we’re talking mouth-burning, tear-jerking, forehead-sweating spicy – you’ll likely meet your match at this annual event. The toughest of palates, as well as those who like it considerably milder, can try hundreds of gourmet and novelty foods, including beef jerky, sauces, salsas, jellies, rubs, lollipops and straight-up raw hot peppers.

Where: Minnreg Hall, Largo
Web: ilikeithotfestival.com

AFT, CRAFT & WINE FESTIVAL – More than 150 artists and craftsmen sell original artwork and gifts in beautiful Cranes Roost Park. Guests can also stop by the various wine tents and taste a wide variety of reds, whites, champagnes and roses as a part of the event's Wine Stroll.

Where: Crane Roost Park, Altamonte Springs
Web: aacwf.com

FOOD TRUCK WARS – Come very hungry and pace yourself at Winter Haven's Food Truck Wars, where patrons can vote for their favorite dishes among 40 trucks. The offerings include gelato, doughnuts, kabobs, pizza, lobster rolls, tacos, chowders, hummus and more.

Where: Central Park in downtown Winter Haven
Web: foodtruckwars.com

OCTOBER EVENTS

TAMPA GAY AND LESBIAN FILM FEST

The Tampa Bay Business Guild, the Bay Area Human Rights Coalition, and the Tampa Bay Gay Men's Chorus come together to host this film festival, screened at the historic Tampa Theatre. While a few parties and galas surround the event, it is centered mainly on film and the arts, attracting a more cerebral crowd.

Where: Tampa

SARASOTA PUMPKIN FESTIVAL – Orange is the new Sarasota, as the city hosts its all-things pumpkin weekend. Features include: pumpkin patch, pumpkin maze, carnival rides, pie-eating contests, hay rides, 100 live shows, kids' zone, Live Ninja Turtle show, pony rides, petting zoo, circus and a tricky-dog show.

Where: Payne Park, downtown Sarasota

THE NEON VIBE 5K – The perfect pre-Halloween race event is eerily lit with glow-in-the-dark beads, glow sticks and bodies splashed with neon colors. While a DJ pumps techno and dance music, runners and walkers will pass through "glow zones" and cool down at the "aftervibe celebration" at the end.

Where: Premier Sports Campus, Lakewood Ranch
Web: theneonvibe.com/sarasota

15 MINUTES OF FAME FILM FESTIVAL – This free, no-frills film festival is for those who truly love movies -- especially very short movies. Get the chance to screen a colorful variety of documentaries, music videos, animation, narratives and other creative forms of film, each running no longer than 15 minutes.

Where: International Palms Resort and Conference Center, Orlando
Web: 15minutefilmfest.com

CENTRAL FLORIDA VEG FEST – This vegetarian festival touts itself as one of the biggest and best in the country, drawing hundreds of food and product vendors and presenters from around the world. Bring your dog, pet a pig, take a yoga class and sample creative and delicious vegetarian and vegan dishes.

Where: Orlando Festival Park, Orlando

Web: cfvegfest.org

ZOOBOO KIDS – For the little trick-or-treaters too young to enjoy gory zombies and haunted mansions, Lowry Park created a new “fright-free” Halloween event for kids ages 3-11. Think adorable costumes, critters, corn mazes and characters that will make for great photo ops and create nice memories rather than nightmares.

Where: Lowry Park Zoo, Tampa

GREAT AMERICAN COOTER FEST– Inverness’ most famous – or at least famously named – festival returns with music, dancing, food trucks, boat races and more. Check out the impressive costume contest and sample a treat from a cupcake bake-off, all in the name of a mythical turtle named Cooter.

Where: Liberty Park, Inverness

Web: www.cooterfestival.com

OKTOBERFEST TAMPA – Get into the spirit with this Deutsch-themed, three-day party, complete with frothy beer, lederhosen, accordion music and other shenanigans. Vendors will be serving up currywurst, warm pretzels and German baked goods. Guests can participate in the stein hoisting, keg stack, “carry the wench” and other games.

Where: Curtis Hixon Park, downtown Tampa

Web: oktoberfesttampa.com

THE FESTIVAL – Also known as the Shelton Brothers Festival, this roving event will visit St. Petersburg and its thriving craft beer scene, introducing around 90 local, national and International artisanal beer, cider, and mead makers through tastings and workshops.

Web: sheltonbrothers.com

ART & ALGORITHMS – Science nerds and visual artists join forces in this free, walkable festival that piques the senses with interactive artwork, an iPad lab, International short film screenings, digital gaming, virtual reality exhibits and other cool and entertaining displays.

Where: Downtown Titusville

Web: artandalgorithms.com

MOUNT DORA BICYCLE FESTIVAL– Cyclists from all over the world love this three-day weekend of multiple routes along gorgeous Mount Dora, ranging from a friendly ghost ride to crushing hill climbs, as well as pre-ride breakfasts, a beer garden and other activities.

Where: Mount Dora

Web: moundorabicyclevestival.com

LAKELAND ZOMBIE FEST – Experience the closest thing to a zombie apocalypse you can imagine as tens of thousands of bloody, ashen-faced, hollow-eyed zombie wannabes slither through the streets of Lakeland. Kids can hit the “safe zone” if they’re not fans of walking dead people, and food vendors and dance and costume competitions lighten the mood.

Where: Sun n Fun Convention Campus, Lakeland

Web: lakelandzombiefest.com

BRICK-OR-TREAT – LEGOLAND has expanded its annual celebration so that more can enjoy the building activities, scavenger hunts, the world's largest LEGO jack-o-lantern and a nightly Halloween-themed fireworks show.

Where: LEGOLAND, Winter Haven

Web: legoland.com

OCALA ARTS FESTIVAL – Art lovers and collectors fill the streets of historic downtown Ocala for this juried fine arts show with 155 artists and craftsmen from all over the country. Kids can also enjoy activity stations and entertainment and holiday shoppers can get an early start at the crafts and gifts tents.

Where: Downtown Ocala

Web: fafo.org

CLEARWATER JAZZ HOLIDAY – This International music fest has drawn acts such as Dizzy Gillespie, Tony Bennett and Branford Marsalis.

Where: Coachman Park, Clearwater

Web: clearwaterjazz.com

NOVEMBER EVENTS

SAND ART TRIO – Not one, not two, but count 'em, three this year! You can't go wrong with any of them: the Annual American Sand Sculpting Championship and Beach Festival on Fort Myers Beach, the International Sand Art Competition in Key West and the Annual Siesta Key Crystal Classic International Sand Sculpting Festival on Siesta Key near Sarasota. No matter which one you attend, you will be awed by the amazing out-of-sand creations.

Where: Siesta Key

Web: Respectively, fmbsandsculpting.com, sandisle.com and SiestaKeyCrystalClassic.com

SARASOTA CHALK FESTIVAL – Hundreds of artists use the pavement as their canvas and pastel chalk as their medium to create breathtaking oversized traditional 3D illusionistic paintings.

You're invited to participate in, attend and interact with the artists as they go about their work.

There's a different theme each year.

Where: Downtown Venice and the Venice Airport Fairgrounds

Web: chalkfestival.org

MEDIEVAL MANIA – It's east coast versus west coast, with Camelot Days Medieval Festival on the former and the Sarasota Medieval Fair on the latter. Either one will take you back to days of yore, with living chess games, jousting competitions, battling knights, jesters, jugglers, birds of prey and lots of good grub and grog.

Where: Respectively, T. Y. Park in Hollywood and Ringling Woods behind the Sarasota Fairgrounds.

Web: Respectively, camelotdays.com and sarasotamedievalfair.com

"CHRISTMAS SPECTACULAR!" HOLIDAY HOME TOUR - Elaborate, elegant, over-the-top designer Christmas decorations in one of Florida's most historic mansions. The 1886 "Gilded Age" Victorian Stetson Mansion has been recently been listed as one of the "Top 10 Things to do in Florida" by Tripadvisor. Reservations required.

Where: Stetson Mansion, 1031 Camphor Ln, DeLand, FL 32720

Web: stetsonmansion.com/

THE FANCY FLEA – Rather than the usual hodgepodge of items found at traditional markets, this is a different kind of flea market, targeted toward the Southern belles with upscale tastes. The outdoor vintage show offers shabby chic décor, furniture, antiques, garden and patio accessories and artwork.

Where: Strawberry Festival Fairgrounds, Plant City

Web: fancyflea.net

VOLUSIA COUNTY FAIR & YOUTH SHOW – Local kids showcase their livestock and talents in art, photography, music and craft projects while families enjoy fair rides, food, live music and interesting exhibits for all ages.

Where: Volusia County Fair & Expo Center, Deland

Web: volusiacountyfair.com

ZOOFARI – More than 50 local restaurants serve up their best dishes and recipes at this popular zoo fundraiser, where participants enjoy an open bar, live music and dancing.

Where: Lowry Park Zoo, Tampa

Web: lowryparkzoo.org/zoofari

STONE CRAB JAM – Shrimp, fish, and, of course, stone crab, are the cornerstone of the feast served at this rotary club festival and fundraiser, which also features vendors selling handmade wood furniture, embroidered clothing and other crafts and gifts.

Where: Crystal River

Web: kingsbayrotary.org/stone_crab_jam

MOUNT DORA PLANT & GARDEN FAIR – Experienced gardeners love finding obscure and unique plants and flower; beginning gardeners learn heaps of great info at this colorful fall fair. Shop for anything, including water lilies, olive trees, raw honey and hand-painted pots.

Where: Downtown Mount Dora

Web: mountdoraplantandgardenfair.org

RIBFEST – For more than 26 years, people have been flocking to the smoky aroma of this yummy fest, where various “ribbers” from around the U.S. compete for top prize. Plus, hot dogs, funnel cakes, Texas fries and other fun foods. The event also draws big musical names.

Where: Vinoy Park, St. Petersburg

Web: ribfest.org

WHEN PIGS FLY SOUTH BBQ CHALLENGE – Billed as the “largest fly-in BBQ in the South,” this fair combines aviation with smoked meats, beer and bands for a fun combination that’s family friendly and free. Stick around for the impressive Warbird fly-in.

Where: SUN ‘n FUN Convention Campus, Lakeland

HOMOSASSA ARTS, CRAFTS AND SEAFOOD FESTIVAL – Set in one of Florida’s best fishing towns, this fest draws artists from all over the country, including painters, sculptors, photographers and jewelers. Sample some Sunshine State specialties such as gator tail and conch fritters.

Where: Historic Old Homosassa

Web: homosassaseafoodfestival.org

ART CRAWL – Thrifty art collectors and shoppers looking for holiday gifts will love this juried art show, which features emerging and established artists selling affordable artwork, much of which will be offered for \$500 or less. Those just looking can enjoy the live music and demonstrations.

Where: Polk Museum of Art, Lakeland

Web: downtownlakelandfl.com/art-crawl

MIXON FRUIT FARMS HARVEST FESTIVAL – Mixon Fruit Farms, one of the state's most well-known citrus farms and country stores, holds this fall weekend of circus acts, antique cars, kid-friendly games, bungee jumping, rock wall climbing and food.

Where: Bradenton

Web: mixon.com/harvestfestival

CONGA CALIENTE – Tampa celebrates Hispanic culture and heritage with live national acts that have included Tito Nieves and Viva Mas in the past. Taste traditional Latin dishes, smoke a Cuba cigar and visit the beer garden or one of the many educational or health displays or the arts and crafts tents.

Where: Al Lopez Park, Tampa

Web: congacaliente.com

DECEMBER EVENTS

SANTA SPEEDO RUN TAMPA BAY -

Joining this light-hearted, Christmas-themed run at Centennial Park is a good excuse to check out Ybor City's holiday decorations, courtesy of the GaYBOR District, which began gaining ground years ago and helped shape the area's business and nightclub scene. Proceeds from the run benefit Brighter Seasons for Children and AIDS Service Association of Pinellas, which serves the Tampa Bay region.

Where: Tampa-Ybor City

LET THERE BE LIGHTS! – Millions and millions of them will light up the South Florida holiday skies and here's where to see some of the best and the brightest: Santa's Enchanted Forest at Tropical Park in Miami; Holiday Nights at the Edison & Ford Winter Estates in Fort Myers; Festival of Lights at Fisherman's Village in Punta Gorda, and Symphony of Lights at the Village of Gulfstream Park in Hallandale.

Web: santasenchantedforest.com, .edisonfordwinterestates.org, fishville.com and thevillageatgulfstreampark.com

SNOW FEST SARASOTA – Daily "snowfall" covers the park in soft, white snow while families play on giant slides, build snowmen and take photos on Santa's lap. The three-day event also offers pony rides, hula hoopers, jugglers, DJs and other holiday entertainment.

Where: Payne Park, downtown Sarasota

ATOMIC HOLIDAY BAZAAR – Continuing its decade-long tradition of bringing weird, wild and uniquely local goods and gifts together in one place, this bazaar market returns with an array of jangly handmade jewelry, unconventionally shaped cookie cutters, cheeky postcards and paper goods, pop art handbags and T-shirts, one-of-a-kind stuffed animals, skull-themed scarves and more.

Where: Municipal Auditorium, Sarasota
Web: atomicholidaybazaar.com

"CHRISTMAS SPECTACULAR!" HOLIDAY HOME TOUR - Elaborate, elegant, over-the-top designer Christmas decorations in one of Florida's most historic mansions. The 1886 "Gilded Age" Victorian Stetson Mansion has been recently been listed as one of the "Top 10 Things to do in Florida" by Tripadvisor. Reservations required.

Where: Stetson Mansion, 1031 Camphor Ln, DeLand, FL 32720
Web: stetsonmansion.com/

GLITTER GLISTEN AND SNOW – Take part in the novelty of Haines City's annual break from the warm and sunny holiday season by enjoying roasted chestnuts, hot cider and cocoa, Santa Claus appearances and luminary lightings. Bring your earmuffs and mittens to play in the falling snow.

Where: Lake Eva Park, Haines City

Web: visitcentralflorida.org

BUSCH GARDENS CHRISTMAS TOWN – Tampa's safari-themed park transforms into a winter wonderland of Christmas shows, music, a Jingle Bell Express train ride for kids, Santa's workshop and more than a million twinkling lights.

Where: Busch Gardens, Tampa

Web: seaworldparks.com/christmastown

PINELLAS PIONEER SETTLEMENT CHRISTMAS JAMBOREE – Experience old-fashioned Victorian holiday festivities at this historic settlement near Boyd Hill Nature Preserve. Take a tour of the living museum and late 1800s buildings, homes and shops, then enjoy the music, craft shows, hay rides with Santa and shopping.

Where: St. Petersburg

Web: pinellas pioneersettlement.org

CHRISTMAS BRICKTACULAR – Think you're a LEGO builder extraordinaire? Check out this impressive display that includes a 30-foot Christmas tree made of 270,000 tiny plastic bricks, a life-size Santa and reindeer sleigh. Kids can make their own structures in an activity area and can participate in a LEGO scavenger hunt.

Where: LEGOLAND Florida, Winter Haven

Web: legoland.com/bricktacular

WINE & CHOCOLATE FESTIVAL – Pair robust reds and creamy whites with fine chocolate at this annual Lakeridge Winery tasting. Artists and crafters display their wares, local bands entertain and vendors serve wine, beer, soft drinks and food.

Where: Lakeridge Winery, Clermont

Web: lakeridgewinery.com

BRADENTON BLUES FESTIVAL – Local and national blues acts entertain along Bradenton's waterfront all day, filling the streets with music while thousands of visitors peruse the food trucks, local vendors and nearby bars.

Where: Riverwalk, downtown Bradenton

Web: bradentonbluesfestival.org

97X NEXT BIG THING – This popular alternative rock concert returns year after year with some of the hottest acts on the scene. Concertgoers can play games, enter contests and visit food and drink tents in between acts.

Where: MIDFLORIDA Credit Union Amphitheatre, Tampa

Web: 97xonline.com

WINTERFEST FESTIVAL OF FINE ARTS & CRAFTS – Beautiful Anna Maria Island hosts a juried arts and crafts show filled with original paintings, glass, jewelry, pottery, sculpture, fiber arts, photography, wood and other works. Patrons can spend all day walking the fest while sampling seafood dishes, BBQ, ice cream and other treats.

Where: City Hall Field, Holmes Beach

Web: islandartleague.org

MAIN STREET HOLIDAYS – New Port Richey counts down to Christmas, kicking off the first couple weekends of December with a holiday lights celebration, followed by a river boat parade, a kids' holiday production and movie, breakfast with Santa and Mrs. Claus and a nighttime street parade.

Where: Downtown New Port Richey

Web: nprmainstreet.com

HOLIDAY HOOPLA – Gulfport brings back its annual street event of holiday creativity, hosting arts, crafts and boutique vendors selling original gifts, a Christmas costume contest with prizes for best family, adult, kid and pet costumes and a lighted boat parade to end the evening.

Where: Gulfport

Web: gulfportma.com/holiday-hoopla

SNOW ON 7TH HOLIDAY PARADE – Ybor City's famous 7th Avenue turns into a winter wonderland of parading characters, colorful floats, marching bands and a Santa Claus appearance, all under a veil of falling snow. Take photos with a large and festive Christmas tree in the center square and greet Tampa's mayor and his family.

Where: Historic Ybor City

Web: snowon7th.com

PLANT CITY BIKE FEST – Vintage cruisers and souped-up Harleys descend on quaint downtown Plant City for a day while kids and adults revel in the spectacle of a bearded lady contest, a hula hoop competition, a caricature artist, live bands and a Santa appearance.

Where: McCall Park, downtown Plant City

Web: facebook.com/PlantCityBikeFest

SANTA FEST – Downtown Tampa's prettiest park becomes a holiday playground for kids, featuring ice skating, make-and-take craft areas, free photos with Santa and the Rough Riders' Holiday Parade with holiday characters, fire trucks and floats.

Where: Curtis Hixon Waterfront Park, Tampa

Web: tampagov.net/santa-fest